

TOWN of BALDWIN - Building Permit Application: Zone _____ Map # _____ Lot # _____ Permit # _____

Please fill out parts of form that apply to the job. Proper plans of building must accompany this form: TOTAL PERMIT FEE: \$ _____

Owner: _____ Phone: _____

Address: _____

Location of Construction: _____ Phone: _____

Contractor: _____

Type of Permit: SSWD form HHE-200 Permit Complete: Yes () No ()

Residential

() New Construction () Resident () Single Family

() Mobile Home - Wd. _____ x Ln. _____ () Two-Family/Duplex

() Accessory Structure - Type _____

() Renovate Interior () Renovate Exterior

Items Renovate: _____

() Remodel - Include Construction Estimate: \$ _____

Items Remodel: _____

*No Permit required for building repair or maintenance.

Commercial Building () Use: _____

Building Size: Wide _____ X Long _____ No. Levels (incl. cellar) _____

No. of Bed-Rms _____ No. of Baths _____

Lot Set-Back (minimum req'd.) Lot Size: Acres _____

Front _____ Rear _____ Side _____ Road Frontage _____ ft.

Estimate cost of construction: Land \$ _____ Building \$ _____

Notes & Remarks: _____

Received By: (sign) _____

Signature of CEO: _____ Date: _____

Foundation: () 8 ft. () 4 ft. () slab () pier () other

Footing size: _____ Wall size _____ Slab Tr'k. _____

Floor: Slab. () Yes () no. Sill _____ Joist _____ Span _____

Floor rough sheathing: _____

Exterior Walls: Studs _____ (16" OC) Sub-Sheath _____

Headers (minimum size) Windows _____ Doors _____ Garage _____

Wall Sub-sheathing _____ Insulation _____

Finish Siding _____ Chimney _____

No. of Windows _____ No. of Doors _____ No. of Garage Drs. _____

Interior Walls: Studs _____ Wall Sheathing _____

Flooring: Kitchen _____ Bd-Rms _____

Living Area _____ Bath Rm _____

(tile-linoleum-carpet-hardwood-other)

Ceiling: Is there a 2nd floor area () Yes () no

(if yes) 2nd level joists _____ span _____

(if no) attic collar ties _____ span _____ truss () yes () no

Roof: () Truss () Rafter. - size _____ span _____

Roof sub-sheathing _____ Roofing cover _____

FEES: (building rate - \$.20 cents per sq. ft. - each level)

Item: _____ Sq.Ft. _____ X \$ _____ = _____

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Item: _____ Sq.Ft. _____ X \$ _____ = _____

TOTAL FEE: \$ _____

INSPECTIONS: () Foundation () Rough () Finish () Cert. of Occupancy Other Inspections: () SSWD () Plumb-hot/cold () Plumb-drain
Phone for inspection: WES - 625-7000. (No electrical code. Owner may do electrical install. Licensed electrician install panel box and meter.)