

Utah County Building Permit Application

51 S University Ave, Suite 117, Provo UT 84601 (801) 851-8342 Office/Inspection Hours Monday-Friday 8-4:30

Owner's Name	Application Date		
Owner's Mailing Address	City	State	Zip
Contact (Name /Phone/Email)			
Contractor's Business Name			
Contractor's Mailing Address		Phone #	
Contractor's License #			
Approximate Job Site Address/Location			
List Any Existing Structures on Property			
Job Site Tax Serial #	Lot Size (acres)		
Utility Providers: Power Fuel/Type	Is there an existing fire sprinkler	system? (Yes/	No) (Existing/New)
Description of Work	Value of Work \$		
Health Department Approval — Must be completed pr Utah County Health Department and Utah State regulations waste water facilities, when applicable for the proposed wo Wastewater Approval Date Potable Water Quality Approval Date Water Source Protection yes/no APPROVED:	s for the installation and/or connection rk or Public Systemor Public System	on to the required Da	potable water and te Date
APPLICANT: PLEASE READ CAREFULLY			
I agree to comply with all County and State Building laws and ord true and accurate, and any misrepresentations or errors herein are liability or obligation to enforcing officers or agents. This permit becomes null and void if work on construction are performed for a period of 180 days, or if construction time after work is commenced. USE OR OCCUPANCY OF A STRUCTURE IS PROBLEM.	the sole responsibility of the applicant, a ion authorized is not commenced w on or work is suspended or abando HIBITED UNTIL AFTER FINAL	nd shall in no way vithin 180 days, ned for a period	or if no inspections of 180 days at any
	OF OCCUPANCY" IS ISSUED	Data	
Owner's or Contractor's Signature			
Printed Name			
Building Submittal Fee \$	Receipt #		