



LAND USE PERMIT

EPHRAIM CITY

5 South Main Street, Ephraim, UT 84627

(This application becomes a permit upon receipt of required approvals and acceptances of required fees.)

PERMIT#

PARCEL#

Assigned Address

DESCRIPTION OF WORK

Project Valuation: \$ _____

Residential Commercial (Name of Business to Occupy Space _____)

New Addition Remodel Basement Finish Sign Service Change

Demolitions Water Heater/Furnace/Air Conditioner Other _____

Address of Property _____

Owner Name _____ Email _____ Phone _____

Owner Address _____ City/ST _____ Zip _____

Applicant Name _____ Email _____ Phone _____

Applicant Address _____ City/ST _____ Zip _____

Inspections: 435.835.2113

Must be scheduled by 3:00 p.m. the day prior to the inspection

Code questions: 435.835.2113

Date: _____ Zone: _____

CONTRACTOR/DESIGNERS

Name _____ State License # _____ Phone # _____

General _____

EMAIL ADDRESS _____

Electrical _____

Mechanical _____

Plumbing _____

Architect/Engineer _____

[OFFICE USE ONLY]

PERMIT TYPE	FEES
Building Subtotal	_____
Plan Check	_____
Electrical	_____
Mechanical	_____
Plumbing	_____
Demolition	_____
State Surcharge	_____
Zoning Permit Review	_____
Power Connection	_____
Water Connection	_____
Water Lateral Inspection	_____
Water Meter: _____"	_____
Temp. Water Use Fee	_____
Sewer Lateral Inspection	_____
Impact Fees	_____
Road Cut Permit Fee	_____
Asphalt Repair	_____
Curb/Sidewalk Deposit	_____
Aid In Construction Fee	_____
Other	_____

CHECK ONE

LICENSED CONTRACTOR DECLARATION

OWNER-BUILDER DECLARATION

I herby affirm that all work will be performed by contractors licensed under the Construction Trades Licensing Act (58-55, UCA) whose licenses are in full force and effect.

If contractors have not been selected at the time of the application for this permit, the permit is issued only on the condition that currently licensed contractors shall be selected by the applicant, that the applicant shall provide the names and license numbers of the contractors to Ephraim City, and shall enter the same names and numbers on the permit before they begin their work.

I hereby claim exemption from the requirement for licensing under the Construction Trades Licensing Act (58-55, UCA) because work will be performed by the owner of the property for his/her private, non-commercial, non-public use. Any work not performed by the owner will be performed by a contractor licensed under the Construction Trades Licensing Act, and the names and license numbers of the contractors shall be provided to Ephraim City, and shall be entered on the permit before their work is begun.

This permit shall become null and void if work is not commenced within 180 days, or if work is suspended or abandoned for a period of 180 days or more at any time after the work has commenced. Commencement or continuation of work shall be verified only by inspection reports from an inspector for Ephraim City. All required inspections shall be requested at least one working day before they are to be made. Inspections are required before any work is covered. Please call if you need further information about when an inspection is required.

I hereby certify that I have read and examined this permit and that the information provided by me is true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction. I hereby agree to assume responsibility to correctly identify and mark property lines.

Signature of Applicant : _____ Date : _____ Please Print Name : _____

TOTAL: \$ _____

Prepaid Plan Check (_____)

Receipt # _____

Rec'd by _____ Date _____

Check # _____

BALANCE DUE \$ _____

Receipt # _____

Rec'd by _____ Date _____

Check # _____

[OFFICE USE ONLY]

Zoning Comments (if applicable) _____

Public Works Comments (if applicable) _____

Approved _____ Date _____

Approved _____ Date _____

Power Director Comments (if applicable) _____

Fire Chief Comments (if applicable) _____

Approved _____ Date _____

Approved _____ Date _____

Building Comments (if applicable) _____

Approved _____ Date _____

[OFFICE USE ONLY]

Type of Construction _____

Occupant Load _____

Group/Division _____ Square Feet

Main Floor _____

Basement _____

Fire Sprinklers Yes No