



BUILDING PERMIT APPLICATION
FERRON CITY BUILDING DEPARTMENT

APPLICANT INFORMATION (Please type or print)

Building Permit # \_\_\_\_\_

Name of Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Box: \_\_\_\_\_ City: \_\_\_\_\_ Zip \_\_\_\_\_

Job site Address: \_\_\_\_\_ City: \_\_\_\_\_

CONTRACTOR INFORMATION (Including sub-contractors)

General Contractor: \_\_\_\_\_ License # \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

Signature: \_\_\_\_\_

Sub Contractors:

Electrical Contractor: \_\_\_\_\_ License # \_\_\_\_\_

Signature: \_\_\_\_\_

Plumbing Contractor: \_\_\_\_\_ License # \_\_\_\_\_

Signature: \_\_\_\_\_

Heating Contractor: \_\_\_\_\_ License # \_\_\_\_\_

Signature: \_\_\_\_\_

Cement Contractor: \_\_\_\_\_ License # \_\_\_\_\_

Signature: \_\_\_\_\_

Excavation Contractor: \_\_\_\_\_ License # \_\_\_\_\_

Signature: \_\_\_\_\_

Septic Contractor: \_\_\_\_\_ License # \_\_\_\_\_

Signature: \_\_\_\_\_

\*\*\*\*SIGNATURES ARE REQUIRED FOR PROCESSING APPLICATION\*\*\*\*

MANUFACTURED HOMES

Manufacturer: \_\_\_\_\_ Year: \_\_\_\_\_ Model # \_\_\_\_\_

Dealer: \_\_\_\_\_ Dimensions: \_\_\_\_\_ X \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

Installation Contractor: \_\_\_\_\_ License # \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

Signature: \_\_\_\_\_

**Please read carefully:**

Applicant agrees to comply with all City, County and State Building Laws and Ordinances and certifies that the representations in this application for a building permit are true and accurate, and any misrepresentations in this application or errors herein, are the sole responsibility of the applicant, and shall in no way incur or accrue liability or obligation to enforcing officers or agents.

**Occupancy of a structure is prohibited until after the final inspection is complete and the Occupancy Certificate is issued.**

**Owner signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Occupancy type for residential or commercial \_\_\_\_\_ Occupancy Load \_\_\_\_\_

Building Type and Fee Calculation	Sq. Ft. Area	Sq. Ft. Value	Total Value
Basement _____ Rough _____ Finished _____			
Main Floor			
Second Floor			
Garage			
Car Port			
Covered Porch / Patio / Deck			
On site Improvements			
Storage Shed			
Remodel			
Electrical Inspection			
Gas Inspection			
Commercial Building			
Other			
Total Valuation			

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**OFFICE USE ONLY**

Base Building Permit Fee \$ \_\_\_\_\_  
Plan Check Fee \$ \_\_\_\_\_  
Base Fee x .65  
SUBTOTAL \$ \_\_\_\_\_  
1% State Surcharge \$ \_\_\_\_\_  
Total Fee Due \$ \_\_\_\_\_

Paid Cash \_\_\_\_\_ Check # \_\_\_\_\_

Building Permit # \_\_\_\_\_

Date Issued: \_\_\_\_\_

Approved for Issue by \_\_\_\_\_