

# CITY OF OLD RIVER-WINFREE RESIDENTIAL BUILDING PERMIT APPLICATION

PERMIT NUMBER \_\_\_\_\_

ADDRESS OF PROJECT: \_\_\_\_\_ LOT: \_\_\_\_\_ BLOCK: \_\_\_\_\_

SUBDIVISION: \_\_\_\_\_ ZONING DISTRICT: \_\_\_\_\_

CURRENT PROPERTY USE: \_\_\_\_\_ PROPOSED PROPERTY USE: \_\_\_\_\_

DESCRIPTION AND NAME OF BUSINESS: \_\_\_\_\_

OWNERS NAME: \_\_\_\_\_ PHONE:(\_\_\_\_\_) \_\_\_\_\_

OWNERS ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

CONTRACTOR NAME: \_\_\_\_\_ PHONE:(\_\_\_\_\_) \_\_\_\_\_

CONTRACTORS ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

CONTRACTOR'S E-MAIL ADDRESS: \_\_\_\_\_

ARCHITECT/ENGINEER: \_\_\_\_\_ PHONE:(\_\_\_\_\_) \_\_\_\_\_

| Type of Permit                  |               |                       |
|---------------------------------|---------------|-----------------------|
| New Residence                   | Carport       | Urban Rehab           |
| *Add or Remodel Residence       | Fence         | Community Development |
| Foundation Repair               | Driveway      | Fire / Flood Damage   |
| Placement of Moved in Residence | Garage        | Other 1               |
| Storage Building                | Swimming Pool | Other 2               |

DESCRIPTION OF IMPROVEMENT: \_\_\_\_\_

COST OF IMPROVEMENT \$ \_\_\_\_\_ (Dollar value of Labor and Materials)

SQUARE FOOTAGE OF:  
BUILDING OR RESIDENCE \_\_\_\_\_

NUMBER OF STORIES: \_\_\_\_\_

SQUARE FOOTAGE OF:  
GARAGE \_\_\_\_\_

NUMBER OF BEDROOMS: \_\_\_\_\_

NUMBER OF BATHROOMS: \_\_\_\_\_

- ADDRESS NUMBERS MUST BE POSTED DURING CONSTRUCTION AND PERMANENTLY AT TIME OF FINAL INSPECTION.
- THIS CERTIFIES THAT ON THIS DATE I MADE AN APPLICATION FOR A PERMIT WITH THE CITY OF OLD RIVER-WINFREE, I AGREE TO FOLLOW ALL BUILDING CODES AND CITY ORDINANCES AND MEET ALL DEED RESTRICTIONS.

APPLICANTS SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

APPLICANTS PRINTED NAME \_\_\_\_\_

### OFFICE USE ONLY

ZONING ADMINISTRATOR \_\_\_\_\_ DATE \_\_\_\_\_

PLAN REVIEWER \_\_\_\_\_ DATE \_\_\_\_\_

FLOOD HAZARD VERIFICATION  NO HAZARD  YES – ELEVATION CERTIFICATE REQUIRED

