



Cassia County Building Permit Application

Main Contact Phone #: _____

1. Site Address _____
(please check) (Actual) or (Approximate) City _____ State _____ Zip _____

2. Property Owner _____
 Name _____
 Address _____ City _____ State _____ Zip _____ Phone _____

3. Contractor _____
 Name _____
 Address _____ City _____ State _____ Zip _____ Phone _____

Contractor Registration Number _____ Expires _____

4. Parcel Number _____ Is there a residence existing on this parcel? yes no

Reviewed by: _____
(Assessor's Office Verification Signature)

**** For Residential Permit only: If Assessor's Office marked that a residence is already existing on the parcel number listed, the County Administrative Office will need to see if the parcel qualifies for construction of a residence. ****

5. Recorded Deed Number (for new residential construction only) _____ (submit copy)

6. Septic Permit Number _____ (submit copy)
(Must be obtained from the South Central District Health - 678-8221)

7. Drive Approach Permit Number _____ (submit copy)
(Please designate which entity, if any, covers the area for which the permit is sought. By signature affixed hereto, an authorized agent for designated entity acknowledges that entity has been notified of this application and that said entity may submit in writing, indicating its review of the proposal and comments relative to the matter for which permit is sought.)

Authorized Signature: _____
 Signature _____ Printed Name _____
 Title _____ Date _____

8. Applicable Irrigation District or Canal Company _____
(Please designate which entity, if any, covers the area for which the permit is sought. By signature affixed hereto, an authorized agent for designated entity acknowledges that entity has been notified of this application and that said entity may submit in writing, indicating its review of the proposal and comments relative to the matter for which permit is sought.)

Authorized Signature: _____
 Signature _____ Printed Name _____
 Title _____ Date _____

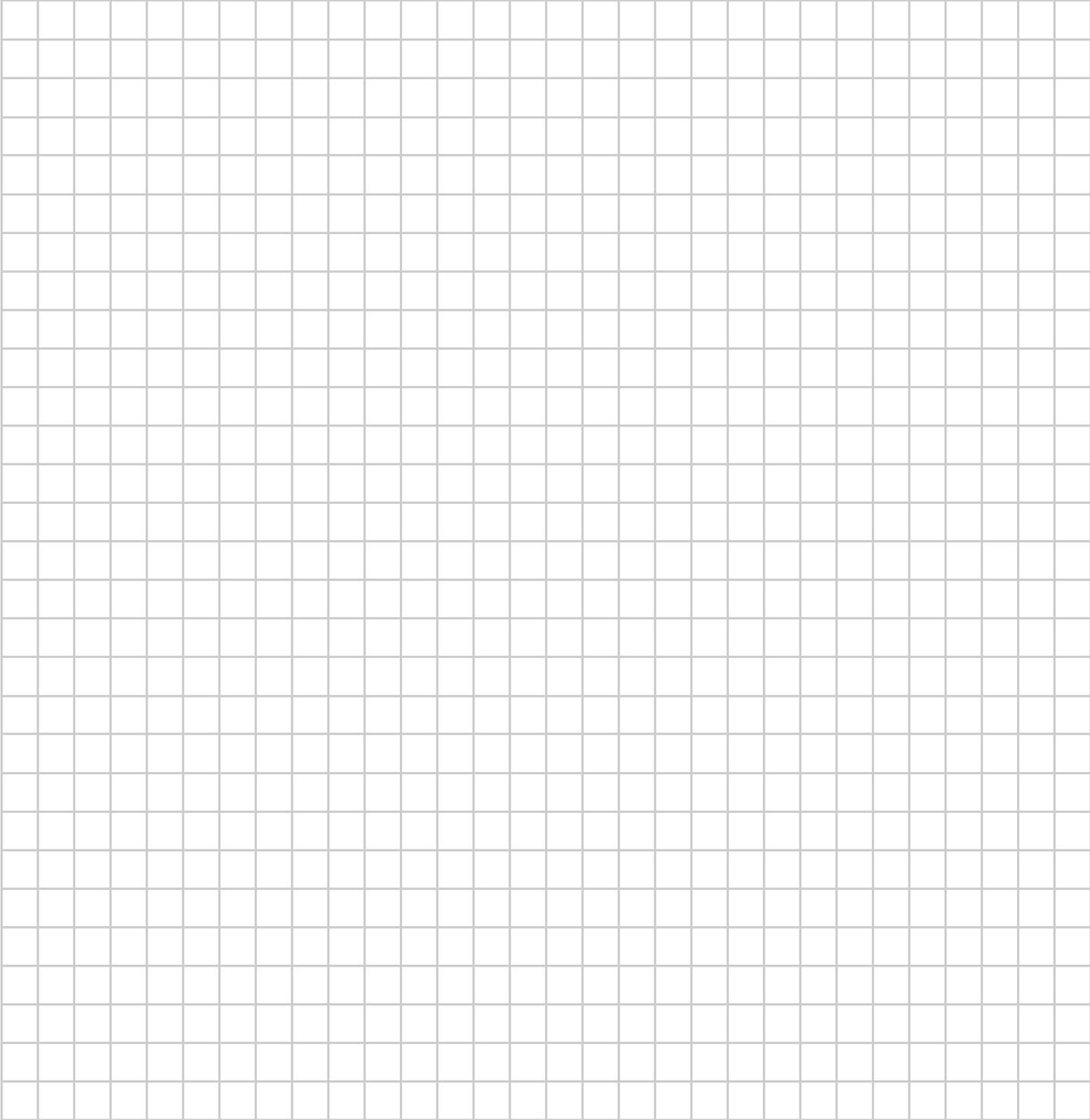
9. Applicable Fire District _____
(Please designate which entity, if any, covers the area for which the permit is sought. By signature affixed hereto, an authorized agent for designated entity acknowledges that entity has been notified of this application and that said entity may submit in writing, indicating its review of the proposal and comments relative to the matter for which permit is sought.)

Authorized Signature: _____
 Signature _____ Printed Name _____
 Title _____ Date _____

10. USE **(Check one)** Residential Commercial
(Check one) Residence Garage Shop Storage Other _____
(Check one) Site built Addition Remodel

11. BUILDING AREA:
 Main floor _____ sq. ft.
 2nd floor _____ sq. ft.
 Basement _____ sq. ft. Finished Basement Unfinished Basement
 Garage _____ sq. ft. Attached Garage Detached Garage
 Deck (s) _____ sq. ft.
 Covered Patio/Porch _____ sq. ft.
 Other _____ sq. ft. Describe Other: _____

PLOT MAP



- On the plot plan drawing you need to show:
1. Roads—Distances from center to building. Must be at least 54 feet.
 2. Interior Property Line Measurements—must be no closer than 5 feet.
 3. Any Easements. (Cannot Build Over)
 4. Other Structures—Distances from.

NAME: _____ SCALE: 1 Square = _____ feet.

ADDRESS: _____ Indicate distance from road & interior property lines to project