RESIDENTIAL BUILDING/ZONING PERMIT APPLICATION TOWN OF REDHILL 740-555-8989

PERMIT ISSUANCE//	PERMIT #
Applicant Information - (Applicant is the Owner or Contractor)
ADDITO ANT / (Overson / Combractory)	EMAIL
JOB ADDRESS	
PROJECT DESCRIPTION	
OWNER	PHONE
OWNER ADDRESS	
CONTRACTOR	PHONE
CONTRACTOR ADDRESS\$ ESTIMATED COST OF CONSTRUCTION \$	PHONE (Cost of Materials and Labor. Excludes Lot.)
ESTIMATED COST OF CONSTRUCTION \$	(Cost of Materials and Labor, Excludes Lot.)
*FRONT SETBACK	BASEMENT AREA
*LEFT SETBACK	FIRST FLOOR LIVING AREA
*RIGHT SETBACK	
*REAR SETBACK	GARAGE AREA TOTAL BUILDING AREA (SQ. FT.)
(*SETBACKS INCLUDE OVERHANGS, CHIMNEYS ETC.)	TOTAL BUILDING ARLA (SQ. 11.)
AND WHEN, AND HOW TO REQUEST AN INSPECTION. I CALL THE TOWN OF REDHILL AT 740-555-8989 FOR BLDG., ELECTION. I CALL POLK CO. HEALTH DEPT. AT 399-568-0001 FOR ALL PLUME SIGNATURE OF Owner/AgentDATE	
•	Do Not Write Below This Point
Use	Conditional Zoning
Plan. Com. Approval Date	District
B.Z.A. Approval Date	# #
In Flood Hazard Area? Yes No	——— City Lot #
Fee	Computation
CONSTRUCTION BASE FEE	<u>Computation</u> BP BP (x \$.15) \$ BP
TOTAL BUILDING AREA (SQ. FT.)	(x \$.15) \$ BP
FIREPLACE OR ADDITIONAL HVAC	
	\$ZF
RECREATION DEVELOPMENT FEE	\$DA \$DR
	\$ \$
	\$
OTHER	\$
OTHER	\$
TOTAL PERMIT FEES	\$

ZONING OFFICIAL / DEPUTY APPROVALDATE

BUILDING OFFICIAL / DEPUTY APPROVALDATE