



SYRACUSE CITY BUILDING PERMIT APPLICATION

Syracuse City Building Department - 1979 W 1900 S - Syracuse, Utah 84075 - Telephone 801-614-9670

| | | | | | | | |
|---|------|---------------------------------|------|---|-------------|--------------------------|--|
| Date of Application | | Date Work to Begin | | Receipt No. | Date Issued | Permit No. SYR | |
| Proposed Use | | | | Building Fee Schedule | | | |
| Bldg. Address | | | | Sq. Ft. of Building: | | Valuation: \$ | |
| Assessor's Parcel No. | | | | <input type="checkbox"/> Rough Basement: | | Building Fee | |
| Lot No. Subdivision/Phase# | | | | <input type="checkbox"/> Finished Basement: | | Plan Check Fee | |
| Total Property Area - In sq. ft. | | | | Carport Sq. Ft.: | | Sec. Conn. | |
| Total Bldg. Site Area Used | | | | Garage Sq. Ft.: | | Sec. Impact | |
| Owner | | | | Type of Bldg. | | Water Impact | |
| Address | | | | Occ. Group | | Park Fee | |
| City | | Zip | | No. of Bldgs. | | Water Conn. | |
| Phone | | No. of Stories | | R - Values | | Sewer Conn. | |
| Email | | Walls | | Roof | | Storm Sewer Impact | |
| Tenant/Business Name | | | | No. of Bedrooms | | Traffic Impact | |
| Business License No. | | | | No. of Bathrooms | | State Fee | |
| Architect/Engineer | | | | No. of Dwellings | | Constr. Meter | |
| License | | | | Type of Construction | | Public Safety Fee | |
| Phone | | | | <input type="checkbox"/> Frame <input type="checkbox"/> Brick Var. <input type="checkbox"/> Concrete | | NDSD Impact | |
| General Contractor | | | | <input type="checkbox"/> Brick <input type="checkbox"/> Block <input type="checkbox"/> Steel | | Garbage | |
| Address | | | | Max. Occ. Load | | Sq. Ft. Porch/Patio | |
| City | | Zip | | Brick Design | | Other | |
| Phone | | Yes | | No | | Other | |
| Email | | | | Fire Sprinkler | | U Factor Window | |
| Electrical Contractor | | | | Yes | | Yes | |
| License | | | | No | | No | |
| Address | | | | Fire Alarm | | TOTAL | |
| City | | Zip | | Yes | | | |
| Phone | | No | | No | | | |
| Email | | | | | | | |
| Plumbing Contractor | | | | | | | |
| License | | | | | | | |
| Address | | | | | | | |
| City | | Zip | | <i>If any person takes occupancy prior to receiving 'Certificate of Occupancy' document from Syracuse City, the Contractor/Permit Signee will be cited with a Class B misdemeanor according to the adopted ordinance.</i> | | | |
| Phone | | | | | | | |
| Email | | | | | | | |
| Mechanical Contractor | | | | Comments: | | | |
| License | | | | | | | |
| Address | | | | Plan Check by: | | | |
| City | | Zip | | Signature of Approval | | | |
| Phone | | | | Date | | | |
| Email | | | | | | | |
| Previous Usage of Land or Structure (past 3 years) | | | | This permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced. I hereby certify that I have read and examined this application and know the same to be 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 and that I make this statement under penalty of perjury. <i>*This permit does not become a permit until signed below*</i> | | | |
| Dwell. Units Now on Lot: | | Accessory Buildings Now on Lot: | | | | | |
| Type of Improvement/Kind of Construction | | | | | | | |
| <input type="checkbox"/> Sign <input type="checkbox"/> Build <input type="checkbox"/> Remodel <input type="checkbox"/> Addition <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Convert Use <input type="checkbox"/> Demolish | | | | | | | |
| No. of Offstreet Parking Spaces: Covered: Uncovered: | | | | | | | |
| SUB-CHECK | | | | Plot Plan | | | |
| Zone: _____ | | Approved by: _____ | | | | | |
| Disapproved Approved | | Sub-Check by: _____ | | | | | |
| Date: _____ | | Indicate North | | | | | |
| Minimum Setbacks in Feet | | | | | | | |
| Front | Side | Side | Rear | Signature of Contractor or Authorized Agent | | | |
| | | | | Date | | | |
| | | | | Signature of Owner (if owner) | | | |
| | | | | Date | | | |
| | | | | Census Tract | | Traffic Zone | |
| | | | | Certificate of Occupancy | | | |

NOTE: 24 hour notice is required for ALL Inspections

PLEASE FILL OUT SHADED AREA ONLY

DEPARTMENT OF COMMERCE
Division of Occupational and
Professional Licensing
Bureau of Investigation
dopltech@utah.gov
160 E 300 S
PO Box 146741
Salt Lake City UT 84114-6741



OWNER/BUILDER CERTIFICATION
and
AGREEMENT TO COMPLY WITH THE
CONSTRUCTION TRADES LICENSING ACT

- New Residential Construction
 Remodel or Addition by Owner

Description of Remodel or Addition _____

Name of Owner/Builder: _____
Current Address: _____
City, State, Zip: _____

LOCATION OF CONSTRUCTION SITE:

Address: _____
City, State Zip: _____
Subdivision: _____ Lot No. _____

CERTIFICATION

I, _____, certify under penalty of perjury that the following statements are true and correct and are based upon my understanding of the Utah Construction Trades Licensing Act:

1. **For New Residential Construction Only.** I am the sole owner of the property and construction project at the above described location; the project described is the only residential structure I have built this year; I have not built more than three residential structures in the past five years.

For New Residential and Remodel Construction:

2. The improvements being placed on the property are intended to be used and will be used for my personal, non-commercial, non-public use:

3. I understand that work performed on the project must be performed by the following:

- a. myself as the sole owner of the property; or
- b. a licensed contractor; or
- c. my employee(s) on whom I have Workers Compensation Insurance coverage, on whom I withhold and pay all required payroll taxes, and with respect to whom I comply with all other applicable employee/employer laws; or
- d. any other person working under my supervision as Owner/Builder to whom no compensation or only token compensation is paid; and

4. I understand that if I retain the services of an unlicensed contractor or compensate an unlicensed person, other than token compensation, or other than as an employee for wages, to perform construction services for which licensure is required, I may be guilty of a Class A Misdemeanor and may be additionally subject to an administrative fine in the maximum of \$2,000.00 for each day on which I violate the Utah Construction Trades Licensing Act.

Dated this _____ day of _____ 20__

Signature of Owner/Builder

Subscribed and Sworn before me this _____ day of _____ 20__, in the County of _____ State of Utah.

My Commission Expires: _____

File this with the City or County Building Department where the work is being performed. The City or County Building Department will forward this form to dopltech@utah.gov REVISION DATE 1/15/2020

Syracuse City Basement Plan Submittal

All building is required to comply with the 2015 International Residential Code











Owner Name: _____

Address of Project: _____

Square Footage: _____



LEGEND

-  New Electrical Outlet
-  New Electrical Outlet (GFCI)
-  New Light Fixture
-  Exhaust Fan
-  Electrical Panel
-  Furnace
-  Wall with Insulation
-  New Wall
-  Smoke Detector
-  Carbon Monoxide Detector

CODE REQUIREMENTS

1. Treated sill plate.
2. 22/32 OSB or similar fire stop at top of wall.
3. 1/2" sheetrock or similar draft stop every 10' along wall.
4. 50 CFM fan in bathroom vented to exterior.
5. Tamper resistant receptacle.
6. Return air.

If combustion air is present, insulate the walls and ceiling of the mechanical room and install a sealed door.