



12830 South Redwood Road
Riverton, Utah 84065

Riverton City Building Permit

Permit #:

*** Valuation:**

Property Information:

Site Address: _____

Description Of Work: _____

Parcel#: _____

Subdivision Name: _____ Lot#: _____

Property Owner: _____

Phone#: _____ E-Mail: _____

Owner Address: _____

Owner City/State/Zip: _____

Building Information:

Sq. Ft. of Building: _____

Garage Sq. Ft.: _____

Basement: Finished Rough

Occupancy Type: _____

Construction Type: _____

of Buildings: _____

of Dwellings: _____

Max Occupancy Load: _____

Fire Sprinklers Required: Yes No

Contractor Information:

Architect/Engineer:

Phone#: _____ E-Mail: _____

Address: _____

City/State/Zip: _____

License #: _____

General Contractor:

Phone#: _____ E-Mail: _____

Address: _____

City/State/Zip: _____

License #: _____

Electrical Contractor:

Phone#: _____ E-Mail: _____

Address: _____

City/State/Zip: _____

License #: _____

Mechanical Contractor:

Phone: _____ E-Mail: _____

Address: _____

City/State/Zip: _____

License #: _____

Plumbing Contractor:

Phone: _____ E-Mail: _____

Address: _____

City/State/Zip: _____

License #: _____

Project Type #: _____ *Official Use Only*

BUILDING FEE SCHEDULE				Valuation	
Sq. Ft. of Building				Building Fees	
<input type="checkbox"/> Rough Basement				Plan Check Fees	
<input type="checkbox"/> Finish Basement				Electrical Fees	
Carport Sq. Ft.				Plumbing Fees	
Garage Sq. Ft.				Mechanical Fees	
Type of Bldg		Occ Group		Construction Water	
No. of Bldgs		R VALUE		Plat Inspection	
		Walls	Roof	Impact Fees	
No. of Stories		R	R	Moving or Demo	
No. of Bedrooms				1% State Sur Charge	
No. of Dwellings				Storm Drain	
Type of Construction				Temporary Conn.	
<input type="checkbox"/> Frame <input type="checkbox"/> Brick Var				Sub Total	
<input type="checkbox"/> Brick <input type="checkbox"/> Block <input type="checkbox"/> Concrete <input type="checkbox"/> Steel				H2O Connection	
Max. Occ Load				DEPOSIT	
Fire Sprinkler <input type="checkbox"/> Yes <input type="checkbox"/> No				TOTAL	

SPECIAL APPROVALS	REQUIRED	RECEIVED	NOT REQ
Board of Adjustment			
Health Department			
Fire Department			
City Engineer (off site)			

Comments: _____

HiBack C.G & S _____

Other _____

Bond Required Yes No Amount _____

SUB-CHECK

Zone _____ Zone Approved By _____

Disapproved _____ Approved _____ Sub.-Ch By _____

Date _____

Minimum Setbacks In Feet to Closest Point			
Front	Side	Side	Rear

THIS APPLICATION DOES NOT BECOME A PERMIT UNTIL SIGNED BELOW.

Plan Chk. OK By _____

Signature of Approval _____ Date _____

I understand that if issued, a building permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction work is suspended or abandoned for a period of 180 day 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 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.

Signature of Contractor/Authorized Agent Date _____

Signature of Owner (If Owner) Date _____