



City of Piedmont Permit Application

Date for Office only:

- _____ Entered
- _____ Paid
- _____ Deposited
- _____ Issued
- _____ Contractor Notified
- _____ Uploaded

Permit#: 2022-_____

All Building Permits require staff review therefore we are unable to issue building permits on an immediate basis. Building permits require extensive review and will be completed in a timely basis. **Residential:** One set of plans (paper and electronic) with plot plans are to accompany the completed building permit for review. **Non-Residential:** Two paper sets and one electronic copy of dimensioned plans are to accompany the completed building permit for review. Staff will contact you when your building permit has been issued and is ready for pick up.

PLEASE NOTE: ALL FEES ARE TO BE PAID BEFORE A PERMIT CAN BE ISSUED. THE CITY OF PIEDMONT'S FEE SCHEDULE CAN BE FOUND ON THE CITY WEBSITE. FEES ARE SUBJECT TO CHANGE. NO CONSTRUCTION IS TO BEGIN WITHOUT AN AUTHORIZED BUILDING PERMIT.

Residential or Non-Residential

Building Type (One per application):

- New Construction
- Remodel
- Add-on
- Accessory Building

Type of Permit (One per application):

- | | | | |
|--|---|-------------------------------------|---|
| <input type="checkbox"/> Building Permit | <input type="checkbox"/> Plumbing | <input type="checkbox"/> Electrical | <input type="checkbox"/> Roofing |
| <input type="checkbox"/> Driveway | <input type="checkbox"/> Drainage/Earthwork | <input type="checkbox"/> Generator | <input type="checkbox"/> Fence (See Back) |
| <input type="checkbox"/> Demolition | <input type="checkbox"/> Sprinkler | <input type="checkbox"/> Oil Well | <input type="checkbox"/> Road Bore (See Back) |
| <input type="checkbox"/> Mechanical | <input type="checkbox"/> Pool | <input type="checkbox"/> Gas Line | <input type="checkbox"/> Sign (See Back) |
| # of Units: _____ | <input type="checkbox"/> Above Ground | | <input type="checkbox"/> Other: _____ |
| | <input type="checkbox"/> In Ground | | |

Project Owner's Name

Contractor's Name

Project Address

Address

Legal Description of Property (Ex. NW/4, Sec. 32, T14N, R5W)

City, State, Zip Code

Project Mailing Address (If Different)

Mailing Address (If Different)

Phone Number

\$ _____
Estimated Value

Phone Number

Project Housing Addition (If Applicable)

E-Mail Address for Permit and Inspection Results

Intended Use (Required for all Residential and Non-Residential Permits)

Square Footage of:	Basement: _____	1 st Floor: _____	2 nd Floor: _____	Garage: _____	Covered Porch/Patio: _____	Total: _____
		3 rd Floor: _____				

Lot Number: _____ **Size of Lot:** _____ **Acres** **City Water?** Yes No **City Sewer?** Yes No

**Note: Cross connections between public and private water supplies are illegal. Public water and sewer connections ARE ILLEGAL without the City of Piedmont's permission.*

Will the construction alter or change the flow of water drainage on the property? Yes No

ALL CONTRACTORS MUST BE LICENSED THROUGH THE CITY OF PIEDMONT

Plumbing Contractor and Phone Number

Mechanical Contractor and Phone Number

Electrical Contractor and Phone Number

Fence Contractor and Phone Number

Sprinkler Contractor and Phone Number

Other Contractor and Phone Number

FENCE PERMIT INFORMATION

Front Yard Fence Length: _____ Height: _____ Type of Fence: _____
Rear Yard Fence Length: _____ Height: _____ Type of Fence: _____
Side Yard Fence Length: _____ Height: _____ Type of Fence: _____

ROAD BORE PERMIT INFORMATION

Road Bore Size: Length in Linear Feet: _____

SIGN PERMIT INFORMATION

Sign Size in Square Feet: Portable 0-100 sq. feet 101-200 sq. feet
 201-500 sq. feet 501 sq. feet and more

Engineered construction drawings must also include the following. Plans will go to the Fire Marshalls office for review (at applicants cost):

The applicant attests that all improves shall meet or exceed International Residential Codes (IRC) and/or International Building Code (IBC) and conform to the Piedmont Zoning Ordinance, Subdivision Regulations, and all other applicable ordinances. All improvements shall be null and void if the foundation is not completed within six (6) months or the improvement does not meet or exceed the above requirements or if any application information is incorrect.

Signature: _____ Date: _____

Printed Name: _____

City Use Only

Permit #: 2022-_____ Parcel #: _____ Zoning District: _____

Address: _____ Flood Zone: _____

Paid Prepaid Amount:\$_____ Check Number:_____

Cash Check Receipt Number: _____ Received by: _____

City Inspector Approval Date

New Builds Only:

Water for Primary Structure:

- Platted (No Water Study Needed)
- Unplatted: Water Study Date:_____ Estimated average day demand PSI:_____(over 25psi)
- Well Water: ODEQ water well approval date _____

Sewer Service Application Completed?

Yes No N/A

Utility Billing Supervisor Approval Date: _____

Public Works Director Approval Date: _____

Community Development Director Approval for Construction Date: _____

Notes: _____

