

**CITY OF CLARKSVILLE, IOWA  
BUILDING PERMIT APPLICATION AND APPROVAL**

**Applicant Information:**

Name of Applicant:
Applicant's Address:
Applicant's Telephone Number and/or E-MAIL ADDRESS:
Applicant's Alternate Telephone Number (Optional):
Applicant's Fax Number (Optional):
Applicant's Email Address (Optional):

**Property Information:**

General Address of Property in Question (parcel number, street address or road address):
Signature of Waiver for set back off adjacent property (if needed): Set Back _____ ft.  _____ Date _____
Signature of Neighbor Council approve Waiver: Date _____ <span style="margin-left: 150px;">Larry D. Betts, CMC, City Clerk/Treasurer</span>
<i>Attach a site plan or plot plan that contains lot dimensions, and size, shape and location of buildings or structures to be erected or affected..</i>

**Request Information:**

Existing Use of Property:	
<b>Estimate Cost of Project:</b>	
Proposed Use of Property or Improvement:	
Actual (Site Specific) Dimensional Information:	Ordinance Dimensional Requirements:
Building Height: _____ Set Back off Adjacent Property: _____ Type of Heat (gas, oil, coal, electricity, wood): _____ Front Yard Setback: _____ Side Yard Setback: _____ Rear Yard Setback: _____ Dwellings Square Feet on Main Floor: _____ Foundation: _____ Concrete Floor: _____ Foundation Barrier: _____ Water Service Needed: _____ Sewer Service Needed: _____ Electrical Work: _____	Maximum Building Height: 45 feet Maximum Accessory Building Height: 20 feet Minimum Set Back off Adjacent Property: 7 feet Type of Heat: _____ Minimum Front Yard Setback: 20 feet Minimum Side Yard Setback: 6 feet Minimum Rear Yard Setback: 10 feet Dwellings Minimum Square Feet on Main Floor: 850 sq. ft. Foundation: (48) inches Required Minimum (Size Building Without) Concrete Floor: 100 sq. ft. Minimum Foundation Barrier: 1 foot Water Service: _____ Sewer Service: _____ <b>All new sanitary sewer services require backwater valves. No sump pumps can be connected to the sanitary sewer.</b> Electrical Permit: _____

**Acknowledgement and Certification of the Applicant and/or Owner:**

I/We understand this application, and that it with required attachments, constitutes our complete building permit application for the proposed use or improvement stipulated above. I/We certify that the information we have provided to the Code Enforcement Officer is complete, accurate, and true to the best of our knowledge. Any intentional falsification or change in the information contained in this application, or to the attached information, shall cause: this application to become null and void and any approval granted herein to be revoked.

I/We understand the nonrefundable fee for a building permit is \$\_\_\_\_\_. Under no circumstances shall all, or part, of this fee be refunded to applicant.

An applicant who is issued a building permit is bound, by acceptance of the permit, to commence the construction for which the permit is issued within six (6) months from and after the date of issue of said permit, and is bound to finish said construction within six (6) months from and after said date of issue. Failure to commence construction within six (6) months shall cause the permit to expire. A building permit issued under the provisions of this chapter shall be valid for a period of six (6) months from and after the date of issue of said permit. Upon expiration of a permit, the holder shall make a new application for a new permit under the provisions of this chapter and shall otherwise go through the same procedure as required for issuance of the original building permit. The fee for the second permit, as in the case of the original permit fee, shall be set by resolution by the City Council.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Owner Signature, if not the applicant

Date: \_\_\_\_\_

Date: \_\_\_\_\_

**Approval of the City:**

Based on the information provided in this application, and attested to, by the applicant, I have reviewed the request and hereby approve of this application for building permit compliance on behalf of the City of Clarksville, Iowa.

\_\_\_\_\_  
Signature of Code Enforcement Officer

Date: \_\_\_\_\_

**As of March 1, 2009, all new electrical installations and alterations must have an ELECTRICAL PERMIT.**

**Please contact you Electrician or Kyle Wedeking, Electrical Inspector  
Iowa Department of Public Safety at (641) 228-0180.**

**ANY QUESTIONS ABOUT BUILDING PERMITS PLEASE CALL  
CLARKSVILLE CITY HALL 319-278-4531  
TO REACH THE BUILDING ENFORCEMENT OFFICER**

**PLEASE SEND THIS FORM TO: City of Clarksville  
115 W. Superior  
Clarksville, IA 50619**