

APPLICATION FOR MISCELLANEOUS BUILDING PERMIT

(CHECK ONE & INCLUDE NECESSARY SUPPORTING MATERIAL)



VILLAGE OF
VOLENTE

VOV USE
ONLY:

Date Submitted:

Amount Rec'd:

Receipt No.

Date Approved
by Engineer:

- Building Remodel Sprinkler System
 Accessory Building Driveway/Culvert
 Storage Building Pool/Hot Tub Other: _____

Address of Property: _____

Legal Description: _____

Property Owner Name(s): _____

Telephone: _____ Email: _____

Mailing Address: _____

Contractor: _____ Contact Name: _____

Telephone: _____ Email: _____

Mailing Address: _____

**Authorized Agent form must be completed if applicant is not owner*

Existing Use: _____ Proposed Use: _____

Existing Zoning: _____ Gross Acres: _____ Project Valuation: _____

Brief Description of Proposed Work: _____

The following items or information must be submitted along with this application:

Description: Written proposal for the project and/or site plan. Describe in as much detail as possible the current and proposed uses/activities. Attach separate sheets as necessary.

Plans: 1 printed copy of the building plans (if applicable) for the property and electronic submission of the plans to the Village of Volente via email.

Deposit: Made payable to the Village of Volente for the amount shown in the Fee Schedule.

Tax Receipt, Closing Statement or Deed, Authorized Agent Form, & Variance Application as applicable.

SUBMITTAL VERIFICATION/INSPECTION AUTHORIZATION

That I, as owner or duly authorized officer of the property hereinafter referenced, do hereby execute this document, acknowledge the above statements to be true and accurate to the best of knowledge, and understand that knowing and willful falsification of information will result in rejection of my application and may be subject to criminal prosecution. I agree to compliance with all applicable codes and ordinances of the Village. I authorize the Village or their representatives to visit and inspect the property for which this application is being submitted. I further understand that Village Staff review time may take up to ten (10) business days per review.

APPLICANT SIGNATURE

Printed Name

Date

STAFF:
