



EAGLE MOUNTAIN

BUILDING PERMIT APPLICATION

INSPECTION LINE: 801-789-6614

www.eaglemountaincity.org

Application form with sections: Application Date, Plans, Survey, Plot Plan, Type Con., Occupancy Group, PERMIT #; Owner Name, Contact Telephone Number; Mailing Address, City, Zip; Job Site Address, Subdivision, Phase, Lot #, Tax Serial ID; EXISTING USE OF PARCEL, INTENDED USE OF PARCEL, SEWAGE; # Dwelling Units, # Bedrooms, # Baths, # Stories, # Fireplaces / Level; Building Dimension, Garage Dimensions, Attached / Detached, Lot Dimensions/Acreage; List existing buildings (and use) on the lot; Project Valuation; Engineer Name, Address, Telephone; Architect Name, Address, Telephone; General Contractor Name, Address, Telephone, License #; Electrical Contractor Name, Address, Telephone, License #; Plumbing Contractor Name, Address, Telephone, License #; Mechanical Contractor Name, Address, Telephone, License #; The undersigned agrees to comply with all Eagle Mountain City, Utah County and State of Utah building laws, codes and ordinances adopted and mandated. I certify the information presented in this application for a building permit are true and accurate. Any misrepresentation or error herein are the sole responsibility applicant and in no way incur or accrue liability or obligation to enforcing officers or agents. This permit becomes null and void if work on the 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 has commenced. Per Eagle Mountain City Consolidated Fee Schedule, 1.4.4; Refunds for permits issued will be limited to 80% of the permit costs, not later than 90 days after the date of fee payment. No refunds for plan review costs will be given if the plan review has been conducted. OCCUPANCY OF THE STRUCTURE IS PROHIBITED UNTIL AFTER FINAL INSPECTION HAS BEEN PASSED AND A CERTIFICATE OF OCCUPANCY HAS BEEN ISSUED. I HAVE VERIFIED THE SEWER DEPTH OF THE ABOVE LOT AND WILL TAKE ALL RESPONSIBILITY FOR SETTING THE STRUCTURE ACCORDINGLY. CONTACT EMAIL ADDRESS; Print Name; Applicant's Signature; License#; FOR DEPARTMENT USE ONLY; DEPARTMENT APPROVAL, APPROVED BY, DATE OF APPROVAL; PLANNING DEPARTMENT; FT CHECK#:, PLAN CHECK DEPOSIT CHECK#:, UFA CHECK#:, PD; COMMENTS; Date Permit Issued; Bldg. Dept. Signature; CONNECTION FEES, FEE AMOUNT; IMPACT FEES, FEE AMOUNT; BLDG DEPT. FEES, FEE AMOUNT; TOTAL FEES; Project Valuation; FLOORS, SQUARE FEET; TOTAL FEE PAID, CHECK #; BLDG DEPOSIT PAID, CHECK#; BUILDER DEPOSIT TO BE RETURNED TO: NAME; Address; Phone; Issued by.