

CITY OF ORIENT

114 S BROAD ST., PO BOX 116
ORIENT, IA 50858
(641) 337-5711

APPLICATION FOR BUILDING PERMIT

APPLICANT: _____

ADDRESS: _____ Primary Phone: _____

CITY, ST, ZIP: _____

WHAT BUILDING WILL BE USED FOR: _____

SITE OF CONSTRUCTION (LEGAL DESCRIPTION): _____

TYPE OF CONSTRUCTION: _____

Date range (if building is temporary): _____

APPROXIMATE COST: _____

SPECIFICATIONS: (ATTACH DRAWINGS, PLANS OR ADDED DETAILS) _____

UTILITIES NEEDED OR CHANGES: (DETAILED DESCRIPTION) _____

Signature

Date

PERMIT FEE: (TO BE PAID AT TIME OF APPLICATION) \$5.00 _____ PAID

COUNCIL USE ONLY:

PERMIT APPROVED _____

PERMIT DENIED _____

RESTRICTIONS: _____
