



PERMIT #

**Responsible Parties** (Permit issuance and correspondence will be with applicant.)

Applicant Name			Property Owner Name		
Is applicant the general contractor?			Mailing Address		Phone
Mailing Address		Phone			Cell
		Cell			
City	ST	Zip	City	ST	Zip
Email Address			Email Address		

**Property Information** (Detailed information can be obtained using *RapidMap* at [www.rcgov.org/gis/rapidmap.html](http://www.rcgov.org/gis/rapidmap.html))

Property Address or Location					
Parcel ID #		Tax ID #		Lot/Legal	
Block	Subdivision				Section
Township	Range	Acres	Current Zoning		

<b>Type of Activity</b>		<b>Square Footages</b>			
New Construction		Finished Space		Garage	
Addition		Unfinished Space		Deck or Porch	
Remodel		Addition		Shed / Carport	
Demolition		Remodeled Space		<b>TOTAL SQ FOOTAGE</b>	
Repair		Construction Dimensions:			
Change of Use					

Number of Stories		Intended Use	
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**For New Construction and Remodels, please provide the following:**

# of Bedrooms in Residence prior to project		# of Bathrooms in Residence prior to project	
# of Bedrooms Added		# of Bathrooms Added	

**Setback Distances to Lot Lines**

<i>Existing Structure</i>				<i>Proposed structures</i>			
Front:		Side:		Front:		Side:	
Rear:		Side:		Rear:		Side:	

**Flood Hazard Information:**

Is the property located within a designated floodway, floodplain, or special hazard area?	YES	
	NO	
<i>If yes, a floodplain development permit is required.</i>		

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**Estimated Cost of Contracted Work**

GENERAL/SOLE CONTRACTOR		Cost \$	
GRADING/FOUNDATION CONTRACTOR		Cost \$	
ELECTRICAL CONTRACTOR		Cost \$	
PLUMBING/HEATING CONTRACTOR		Cost \$	
MECHANICAL CONTRACTOR		Cost \$	
Vendor for any structure built off-site (i.e. shed, modular)		Cost \$	
TOTAL COST \$			

**General/Sole Contractor Information** *(Required for contracted work)*

South Dakota Excise Tax License Number	(Attach Copy)
Liability Insurance Certificate of Insurance Policy Number	(Attach Copy)
Worker’s Compensation Insurance Policy Number	(Attach Copy)
Identification # (Driver’s License or Government I.D.)	(Attach Copy)

THE CITY OF HILL CITY AND THE PLANNING AND ZONING COMMISSION ADOPTED THE “INTERNATIONAL BUILDING CODE” (IBC) FOR USE IN ISSUING BUILDING PERMITS, LIFE-SAFETY CODE, BUILDING CODE, INSPECTIONS AND CODE ENFORCEMENT. ELECTRICAL AND PLUMBING CODES ARE REGULATED BY THE STATE OF SOUTH DAKOTA AND ARE INSPECTED BY STATE INSPECTORS. (The Applicant is responsible for obtaining those permits and obtaining related inspections.) EVERY PERMIT ISSUED BY THE BUILDING OFFICIAL UNDER THE PROVISIONS OF THIS CODE SHALL EXPIRE BY LIMITATION AND BECOME NULL AND VOID IF THE BUILDING OR WORK AUTHORIZED BY SUCH PERMIT IS NOT COMMENCED WITHIN **NINETY (90) DAYS** FROM THE DAY OF APPROVAL OR COMPLETED WITHIN **ONE (1) YEAR**.

I hereby certify that I have examined this application and its attachments, and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified within or not. I further certify that I am the owner or the owner’s authorized agent and that the proposed work is authorized by the owner. I understand that work shall not begin until the permit is issued by this department, that I am responsible for calling for all required inspections, that work shall be accessible for inspection, that a final inspection, approval and Certificate of Occupancy are required prior to occupying/using the structures contained herein. I understand that the granting of this permit does not presume to give authority to violate or cancel the provisions of any Federal, State, or local laws regulating construction or performance of construction.

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

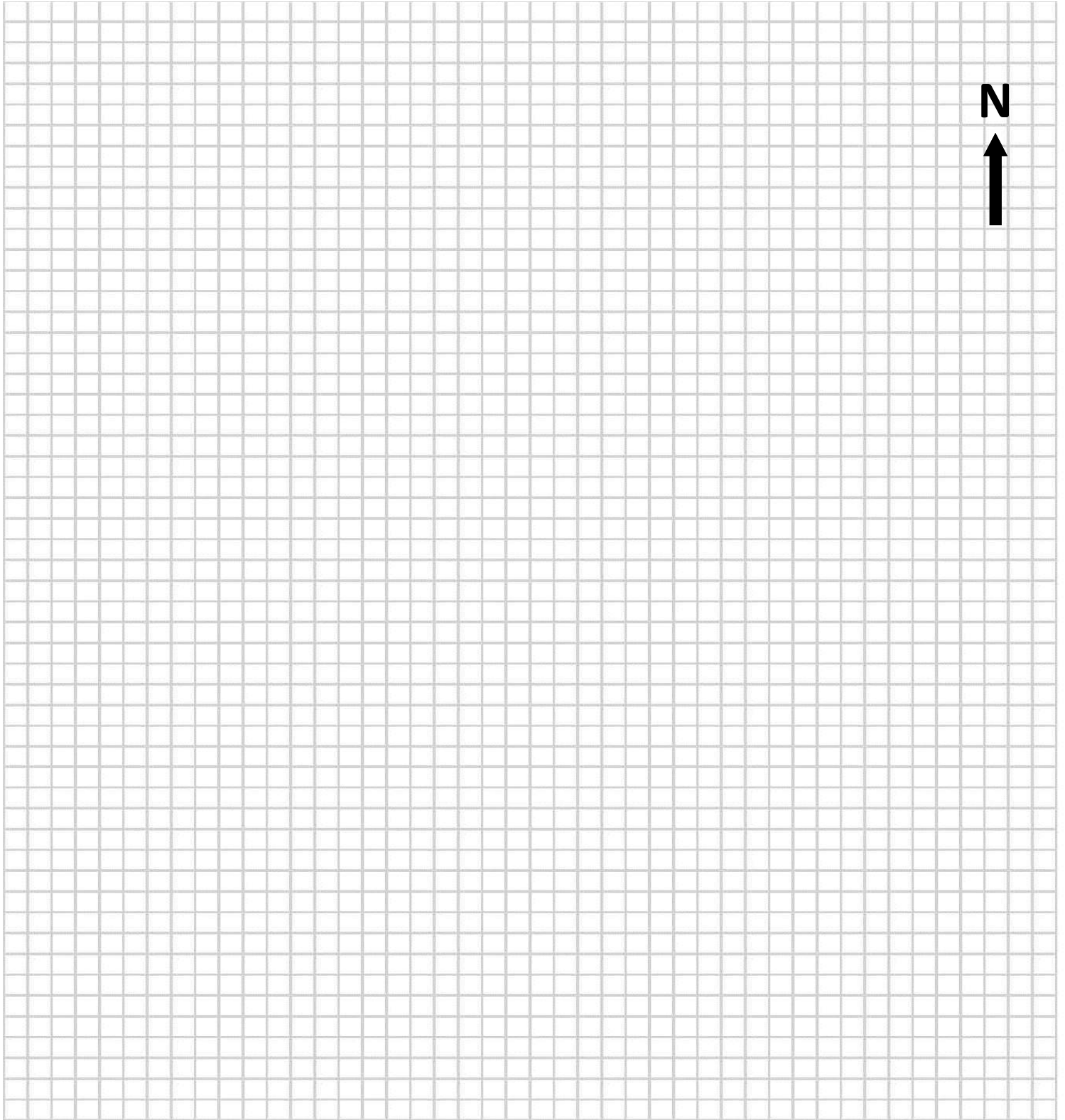
\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date

Applicant Checklist for Complete Application Submittal	Yes	No	NA	<i>Plans and details may be provided on worksheets provided by City, or in documents produced by applicant. Application may be rejected or delayed if required documents are not included and/or are incomplete.</i>
Completed Application				
Site Plan				
Foundation Detail (worksheet, drawing, or written description)				
Framing Detail (worksheet, drawing, or written description)				
Floor Plan and Elevation Drawings (Blueprints)				

**Site Plan Sketch (to scale)**



**Please show the following in your site plan sketch:**

1. Property boundaries with boundary measurements (in linear feet) of all sides of the property
2. Final setbacks of all existing and proposed improvements
3. All existing and proposed structures
4. Access from public right-of-way to property (i.e. driveways)
5. Easements and restrictions
6. Location of floodway and flood fringe if applicable
7. Post construction drainage patterns

**(Shaded Area For Office Use Only)**

**APPLICATION REVIEW**

- Application Complete
- Required plans and sketches included
- Flood Hazard Map Checked
- Submitted to Planning and Zoning Commission
- Fees Paid
- Scanned to digital address file

Plans examiner notes:


**PLANNING AND ZONING COMMISSION**

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

Action: \_\_\_\_\_

Notes:


**FEE RECORD**

Application Fee \$ _____	Date Paid _____	Cash/MO/Check# _____	Receipt # _____
Permit Fee \$ _____	Date Paid _____	Cash/MO/Check# _____	Receipt # _____
Tapping Fee(s) \$ _____	Date Paid _____	Cash/MO/Check# _____	Receipt # _____