



# Application for Residential Building Permit

City of Cedar Falls, Iowa

Job Site Address \_\_\_\_\_ Date \_\_\_\_\_

**Building Use:**

- Residential – Owner Occupied       Residential – Rental/Income Property

*\*State of Iowa requires Homestead Credit for issuance of Homeowner Mechanical, Electrical, or Plumbing Permits*

**Construction Type:**

- New Construction     Addition     Remodel     Deck     Covered Deck     Repair  
 Detached Accessory Building

Owner's Name \_\_\_\_\_ Phone \_\_\_\_\_

General Contractor \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Mechanical Contractor \_\_\_\_\_

Electrical Contractor \_\_\_\_\_

Plumbing Contractor \_\_\_\_\_

Insulation Contractor \_\_\_\_\_

**Description of Work:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Number of Stories Above Grade \_\_\_\_\_ Square Footage \_\_\_\_\_

Below Grade:  Full Basement     Crawl Space     Slab     Other \_\_\_\_\_

**Construction Details:**

<b>Framing</b>	<input type="checkbox"/> N/A		
	Size	Spacing	Span
Interior Wall			
Exterior Wall			
Floor Joist			
Ceiling Joist			
Girder/Beam			
Rafters			
Subfloor			
Roof Sheathing			
Roof Pitch			
Other			

<b>Wall Covering/Finish</b>	<input type="checkbox"/> N/A	
	Type	Thickness
Interior Wall		
Exterior Siding		
Ceiling		
Roofing		
Other		
<b>Concrete</b>	<input type="checkbox"/> N/A	
Footing (Size/Depth)		
Foundation (Width/Height)		
Piers (#/dia/depth)		

\_\_\_\_\_ **Print Name**

\_\_\_\_\_ **Signature**

\$ \_\_\_\_\_

Estimated cost of construction (To include labor, material, mechanical, electrical, plumbing, etc.)

*\*As contractor, I certify that I have the required certificate of insurance as per Cedar Falls Ordinance 7-27Section 104.2*

*\*As homeowner, I certify that I have the required Homestead Credit, and am the owner/occupier of the listed property*

(for office use only)

Received by \_\_\_\_\_ Date \_\_\_\_\_ Zoning Approval \_\_\_\_\_ Date \_\_\_\_\_

Reviewed by \_\_\_\_\_ Date \_\_\_\_\_ Calculated Value \$ \_\_\_\_\_

SWPPP \$ \_\_\_\_\_ Land Use \$ \_\_\_\_\_ Plan Review \$ \_\_\_\_\_ Permit \$ \_\_\_\_\_

Total Fee \$ \_\_\_\_\_ Payment \_\_\_\_\_ Permit # \_\_\_\_\_