

Building Permit Application

Delta City 76 N 200 W Delta, UT 84624
435-864-2759 www.delta.utah.gov



Applicant Name			
Building Address			
Subdivision		Block	Lot
Property Area - In Acres or Square Feet		Total Building Site Area Used	
Proposed Use of Structure:			
Type of Improvement / Kind of Construction:			
<input type="checkbox"/> New Construction		<input type="checkbox"/> Remodel	
<input type="checkbox"/> Move		<input type="checkbox"/> Convert Use	
<input type="checkbox"/> Addition		<input type="checkbox"/> Demolition	
<input type="checkbox"/> Repair			
Previous use of Land or Structure: (3 Years)			
Dwelling Units now on Lot:		Accessory Buildings now on lot:	
OWNER INFORMATION			
Name		Phone	
Address			
Email			
Contact, if Business			
CONTRACTOR INFORMATION			
<input type="checkbox"/> Owner Builder. State Owner/Builder Certification document required.			
General Contractor		Phone	
Address		License #	
Architect or Engineer		Phone	
Address		License #	
Electrical Contractor		Phone	
Address		License #	
Framing Contractor		Phone	
Address		License #	
Plumbing Contractor		Phone	
Address		License #	
Mechanical Contractor		Phone	
Address		License #	
REQUIRED DOCUMENTS			
<input type="checkbox"/> Completed Application packet <input type="checkbox"/> 2 Sets of Plans <input type="checkbox"/> 2 Copies of Plot Map <input type="checkbox"/> Other:			
ZONING			
Zone		Minimum Setbacks:	
Front	Side	Side	Rear
<input type="checkbox"/> ROAD ENCROACHMENT DEPOSIT AGREEMENT REQUIRED			
I understand that the road must be repaired within 90 days of the building permit date or Delta City will repair it and deduct the cost of the repair from the encroachment deposit. In either case, I understand that the deposit will not be refunded until the repair has held for one year. Owner Initials:			
<input type="checkbox"/> SIDEWALK REQUIRED *City Inspection required prior to pouring.			

Permit #:		
Plan Check Deposit:	\$	Date Paid/Receipt #:
Balance Paid #:	\$	Date Paid/Receipt #:

BUILDING INFORMATION		FEE SCHEDULE	
Building	sq ft	Valuation	\$
<input type="checkbox"/> Rough Basement	sq ft	Building Fees	
<input type="checkbox"/> Finish Basement		Plan Check Fees	
Carport	sq ft	State Surcharge	
Garage	sq ft	Water - Connection	
Covered Porch	sq ft	Sewer	
Type of Bldg	Occ Group	Water Rights Acquisition	
# Bldgs	R. Value	Road/Right of Way Encroachment Deposit	
# Stories	Walls	Utility Account Deposit	
# Bedrooms	R		
# Dwellings	R		
Type of Construction			
<input type="checkbox"/> Frame <input type="checkbox"/> Brick <input type="checkbox"/> Brick Var <input type="checkbox"/> Stucco		<input type="checkbox"/> Concrete <input type="checkbox"/> Steel <input type="checkbox"/> Mfg Home	
Max. Occ. Load		Total	
Fire Sprinkler <input type="checkbox"/> Yes <input type="checkbox"/> No		Plan Check Deposit Applied	-
Building Code:		Balance Due	\$

SPECIAL CONDITIONS	
Required by	Approved by

COMMENTS	

SIGNATURES (All approvals required for issuance are required for occupancy)	
Plan Check Approval	
Planning & Zoning Approval	
This permit becomes null and void if work or 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 is commenced. An approved inspection must be made every 180 days minimum or your permit will EXPIRE. I hereby certify that I have read and examined this application 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 herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state of local law regulating construction or the performance of construction and that I make this statement under penalty of perjury.	
Signature of Contractor or Agent	Date
Signature of Owner	Date

This application does not become a permit until signed and receipt issued. Please note: The Building Department does not accept credit cards.
 Sent to County: swilcox@co.millard.ut.us or 435-743-4221
 Owner Builder to state w/ this form: jwoolf@utah.gov, 801-530-6301, or N/A
 PTIF Transfer on Encroachment:



DELTA CITY BUILDING PERMIT APPLICATION CHECKLIST

76 N 200 W
Delta, UT 84624
435-864-2759

www.delta.utah.gov

Applicant Name: _____

Contact, if applicant is a business: _____

Contact Phone Number: _____

Contact Email: _____

Initial each item when complete:

- ___ Completed Building Permit Application
- ___ Completed 'Building Permit Checklist' form
- ___ Signed 'Delta City Inspection Notice' form
- ___ 2 Sets of Plans
- ___ Plot Plan with:
 - All setbacks
 - Dimensions of lot
 - Dimensions of structure
 - Existing and/or proposed utility services
 - Sidewalk, if required
- ___ Property corners need to be surveyed and flagged for verification.
- ___ Port-a-potty on site prior to construction and first inspection. For new construction and permits without existing restroom facilities.
- ___ Miscellaneous Forms:
 - Road/Right-of-Way Encroachment Agreement. Deposit that is required for any cuts made to City Streets or Right-of-Ways.
 - Utility Application. For all permits requesting connection to City Services.

Signature

Date

For City Use Only

Action	Initials	Date
Building Permit application received		
Building Permit number assigned		
Reviewed and approved/denied by building inspector		
Reviewed and approved/denied by public works		
Fees Paid		
Scanned to File		
Filed w/ active permits		
Inspections completed & C of O Issued		
Filed w/ finalized permits		

Notes:



DELTA CITY BUILDING INSPECTION NOTICE

76 N 200 W
Delta, UT 84624
435-864-2759

www.delta.utah.gov

It is the responsibility of the permit holder or contractor to contact the building inspector to schedule all required inspections, which are as follows, IBC 109.5. One (1) full working day notice is required on all inspections.

It is the permit holder's responsibility to deliver approved inspection notice to the City Office for Power, Gas, and Water meter clearance.

INSPECTIONS & APPROVALS REQUIRED:

Footings
Foundations, with steel in place prior to pouring
Underground electrical & plumbing
Rough Plumbing
Rough Electrical
Rough Mechanical
Drywall/Firewall
Exterior: Siding, Brick, Stucco Lath
Gas piping inspection after drywall is hung
Electrical service panel
Final Building Inspection
Sidewalk Inspection, when sidewalk is required
Planning and Zoning Approval

This list may not be conclusive and may vary depending on the scope of the project. If you have any questions, please contact Delta City at 435-864-2759 or the building inspector at 1-800-560-6151.

Please note that the international Building Code Section 110.1 states: "No building or structure shall be used or occupied and not change in the existing occupancy classification ...shall be made until the building official has issued a certificate of occupancy..." A certificate of occupancy will not be issued without all required inspections having been completed and approved by the building inspector and planning and zoning.

**Criminal charges may be filed for violation of this ordinance
and/or city utility services may be disconnected.**

Signature

Date



Delta City
76 N 200 W
Delta, UT 84624
(435) 864-2759 Fax (435) 864-4313
www.delta.utah.gov

RIGHT OF WAY/ROAD ENCROACHMENT AGREEMENT

Action Requested:

- Encroachment Permit. Deposit Paid: \$ _____
- Inspection of initial repairs
- Inspection after 1 year

Name: _____

Address: _____

Phone #: _____ Email: _____

Site Address: _____

Building Permit #: _____

Notes:

I understand that the road must be repaired within 90 days of the building permit date or Delta City will repair it and deduct the cost of the repair from the encroachment deposit.

In either case, I understand that the deposit will not be refunded until the repair has held for one year.

I understand it is my responsibility to schedule an inspection to begin the one year period and at the end of one year.

Signature

Date

Date: _____

Inspector: _____

- Approved
- Disapproved

For Office Use
Notes:

COMPLETE THIS FORM IF YOU WILL BE REQUESTING CITY SERVICES



APPLICATION FOR CITY SERVICES

DELTA CITY · 76 N 200 W · Delta, UT 84624 · 435-864-2759
Office Hours: Monday-Thursday 7AM-6PM, Closed Fridays & Holidays

- | |
|---|
| <input type="checkbox"/> Delta City |
| <input type="checkbox"/> Sherwood Shores |
| <input type="checkbox"/> Fill Station/Hydrant |

Applicant/Business Name:			Move In Date:
S.S.#:	DOB:	DL#:	Employer:
Joint Applicant/Agent:			Relationship:
S.S.#:	DOB:	DL#:	Employer:

Service Address:	Delta, UT 84624
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Mailing Address: Same _____

Phone: _____ 2nd Phone: _____

Email: _____

- Owner occupied Agent, owner name: _____
- Owner, landlord Rent/Lease, landlord/Owner: _____

Emergency Contact/Reference NOT living with applicant:

Name: _____ Address: _____

Phone: _____ Relationship: _____

CONSUMER RESPONSIBILITY

PAYMENT The applicant agrees to pay monthly for the utility services rendered by the City of Delta. Services generally include water, sewer and county garbage. Charges for service will be made at the regular established rates for the class of service applicable to the applicant. It is the consumer's responsibility to review the monthly bills for accuracy and notify the City of any concerns prior to the due date, including current contact information. A fee will be charged on Non-sufficient fund checks. Fees are set forth on the 'Fee Schedule' by the City Council.

DELINQUENCY Payment for services is due immediately upon billing and shall become delinquent if not paid by the due date reflected on such billing. A late charge, as set forth by the 'Fee Schedule', per month of the unpaid balance will be added to delinquent accounts. The applicant agrees to pay reasonable expenses of collection including collection agency fees, attorney's fees, interest fees, and court costs should it become necessary to use such measures to collect the charges made to the applicant's account. The City shall terminate service on delinquent accounts not paid after notice. Accounts issued notice will be charged a fee. In order to restore service, the customers must bring current all delinquent charges. In addition, the City will charge a re-connection fee.

SECURITY DEPOSIT The applicant is required to pay a deposit. It is agreed by the applicant that the deposit is not considered as prepayment of any bill. Unpaid accounts will be considered delinquent notwithstanding the existence of a security deposit. The City may apply the amount of the security deposit to the applicant's final bill and any balance remaining will be refunded to the applicant. Deposit may be waived with a Qualified Guarantor, agreeing in equally liability with customer. Property owners may request security deposit refunded or applied to account after (1) year, provided there have not been any delinquencies or default within that time frame.

REASONABLE ACCESS The applicant shall permit the City's authorized representatives to enter onto the customer's premises at all reasonable times for purposes connected with rendering, billing, or disconnecting utility services. Services may be terminated if reasonable access is not permitted.

TERMINATION OF SERVICE The applicant agrees to be responsible for the payment of utility charges incurred at these premises until their responsibility is terminated in one of the following ways:

1. By mutual agreement evidenced in writing and signed by the City and the applicant.
2. By a two-day written notice from the customer to have services disconnected and the City physically terminating the service.
3. By the proper assumption of the payment responsibility by a party acceptable to the City and upon completion of an application for service by the other party.

The applicant warrants that all the information provided by them in this application is true and correct and understands that false or misleading information shall be cause for the City to deny or cancel service and demand immediate payment of any amounts which are due.

Water is currently: ___ON ___OFF Changes Requested: ___Turn On ___Turn Off

Applicant Signature

Date

<i>For City Use:</i>	Deposit
DL verified by: _____	Amount: _____
Account #: _____	<input type="checkbox"/> Entered
Meter Read: _____	<input type="checkbox"/> Paid Stamp:
<input type="checkbox"/> Entered	
Notes:	



Building Inspector

®
Sunrise Engineering
1-800-560-6151

One (1) full working day notice
is required on all inspections.