

City of Bloomfield  
111 West Franklin Street  
Bloomfield, Iowa 52537  
Phone: 641-664-2260  
Fax: 641-664-2445

# BUILDING PERMIT APPLICATION

## Applicant's Information

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

## Type of Building

House    Stories    Basement    Garage    Storage Shed    Utility Building

Other \_\_\_\_\_

## Type of Construction

Wood Frame    Brick Veneer    Solid Brick    Stone Veneer    Concrete Block

Stucco    Other \_\_\_\_\_

## Type of Housing

Mobile Home    Manufactured Home    Modular Home    Site-Built Home

## Construction Details

Feet from property line to:   Front \_\_\_\_\_   Back \_\_\_\_\_

Left Side \_\_\_\_\_   Right Side \_\_\_\_\_

Height of Building: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

## Zoning

Address of Proposed Construction: \_\_\_\_\_

City Zone Location: \_\_\_\_\_

Use of Building: \_\_\_\_\_

Note: Person making application should be familiar with the City's zoning ordinances.

**Permit expires 90 days from date of approval.  
Project must be completed within two years.  
Permit must be posted on site and visible from the street.**

**Plat of Lot and Description**

Give exact measurements of lot, and size and location of proposed building below. Show sizes and locations of other buildings on lot, as well as streets and alleys.



AFFIDAVIT: I certify that the above information is true and a correct description of the lot and proposed construction.

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

Signature of Architect/Contractor: \_\_\_\_\_

**City Use Only:**

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Permit #: \_\_\_\_\_ Permit Fee: \_\_\_\_\_ Date Paid: \_\_\_\_\_