

Certificate of Completion

Application

1. Property Information:

Address:		Subdivision/COS:				
Section:	ction: Township: Range: Land area (acres or square feet): _					
Other legal des	scription:					_
Geocode/DOR	#:06	·				
Zoning District:		Sub-d	Sub-distict (zoning designation):			
General locatio	on:					
Land Use Perm	nit #: L	_				
Date permit iss	sued:					
Structure com	pletion date:					

2. Structure description: (If more than one structure, please attach additional sheets)

Sing	le-fan	nilv c	lwell	ing
		, .		

Multi-Family,	number of	units:

Condominium,	number	ofι	units:	

Commercial/industrial

Addition onto existing structure, describe: ______

Other (describe): _____

3. Measurements:

Height (as *defined in the specific zoning regulation*): ______ Fill out the setback table below:

	Actual Measurement to Outer Wall of Structure	Actual Measurement to Eaves/overhang of Structure	Setback Distance Required by Zoning Regulation	OFFICE USE: Setbacks Compliant with Zoning?	OFFICE USE: Setbacks Match Site Plan?
Front Property Line					
Rear Property Line					
Side Property Line 1					
Side Property Line 2					
Watercourse					
Irrigation ditch					
Other feature that requires setback					

4. Contract Information (*Please check the box below to identify the primary contact for questions*). Approval documents will be emailed to the property owner and representative, if noted.

Property Owner:	
Name: Address:	Email: Phone:
Applicant (if different than property owner):	
Name:	Email:
Address:	Phone:

AGREEMENT	
By signing this agreement, the property owner and/or authorized the information submitted in this application is true and correct accordance with permit approva	and that all work has been done in
Property owner or authorized representative signature	Date