

City of Cumming

BUILDING PERMIT

Permit # _____

PO Box 100 649 N 44th St. Cumming, IA 50061 | Ph: 515 981-9214 Fax: 515 981-4981 deputyclerk@cumming.iowa.gov

TYPE OF PERMIT: Building Shed Deck Pool Other

ATTACH SITE PLAN, DRAWINGS, AND/OR BUILDING PLANS

JOB SITE		BUILDING SQUARE FOOTAGE																														
<p>ADDRESS: _____</p> <p>NAME: _____</p> <p>DATE: _____</p> <p> <input type="checkbox"/> New Const. <input type="checkbox"/> Addition <input type="checkbox"/> Repair <input type="checkbox"/> Demolition <input type="checkbox"/> Moving Structure <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> One-Family <input type="checkbox"/> Two-Family <input type="checkbox"/> Multi (No. _____) </p> <p>Is property is in a Flood Plain? Yes No Min Elevation MPE _____ Ft.</p> <p>Complies with City PUD and Architectural Standards? Initial here: X _____</p>	<p>Level 1 _____ Pool Size _____</p> <p>Level 2 _____ Deck sqf _____</p> <p>Finished _____ Garage/Shed _____</p> <p>Unfinished _____ Height _____</p>																															
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="background-color: #0056b3; color: white; writing-mode: vertical-rl; transform: rotate(180deg); text-align: center; font-weight: bold;">Owner</td> <td style="width: 50%;">Name _____</td> <td style="width: 50%;">Email _____</td> </tr> <tr> <td style="background-color: #0056b3; color: white; writing-mode: vertical-rl; transform: rotate(180deg); text-align: center; font-weight: bold;">Contractor</td> <td>Address _____</td> <td>Fax No. _____</td> </tr> <tr> <td style="background-color: #0056b3; color: white; writing-mode: vertical-rl; transform: rotate(180deg); text-align: center; font-weight: bold;">Architect-Engineer</td> <td>City _____</td> <td>Telephone No. _____</td> </tr> <tr> <td style="background-color: #0056b3; color: white; writing-mode: vertical-rl; transform: rotate(180deg); text-align: center; font-weight: bold;">Sub-Contractors</td> <td>State/Zip _____</td> <td>Cell No _____</td> </tr> <tr> <td style="background-color: #0056b3; color: white; writing-mode: vertical-rl; transform: rotate(180deg); text-align: center; font-weight: bold;">Sub-Contractors</td> <td>Company Name: _____</td> <td>Phone: _____</td> </tr> <tr> <td style="background-color: #0056b3; color: white; writing-mode: vertical-rl; transform: rotate(180deg); text-align: center; font-weight: bold;">Sub-Contractors</td> <td>State Lic. # _____</td> <td></td> </tr> <tr> <td style="background-color: #0056b3; color: white; writing-mode: vertical-rl; transform: rotate(180deg); text-align: center; font-weight: bold;">Sub-Contractors</td> <td>Company Name: _____</td> <td>Phone: _____</td> </tr> <tr> <td style="background-color: #0056b3; color: white; writing-mode: vertical-rl; transform: rotate(180deg); text-align: center; font-weight: bold;">Sub-Contractors</td> <td>State Lic. # _____</td> <td></td> </tr> <tr> <td style="background-color: #0056b3; color: white; writing-mode: vertical-rl; transform: rotate(180deg); text-align: center; font-weight: bold;">Sub-Contractors</td> <td>Company Name: _____</td> <td>Phone: _____</td> </tr> <tr> <td style="background-color: #0056b3; color: white; writing-mode: vertical-rl; transform: rotate(180deg); text-align: center; font-weight: bold;">Sub-Contractors</td> <td>State Lic. # _____</td> <td></td> </tr> </table>		Owner	Name _____	Email _____	Contractor	Address _____	Fax No. _____	Architect-Engineer	City _____	Telephone No. _____	Sub-Contractors	State/Zip _____	Cell No _____	Sub-Contractors	Company Name: _____	Phone: _____	Sub-Contractors	State Lic. # _____		Sub-Contractors	Company Name: _____	Phone: _____	Sub-Contractors	State Lic. # _____		Sub-Contractors	Company Name: _____	Phone: _____	Sub-Contractors	State Lic. # _____		<div style="background-color: #0056b3; color: white; padding: 2px; text-align: center; font-weight: bold;">DESCRIPTION OF PROJECT:</div> <div style="border: 1px solid black; height: 100px; margin-top: 5px;"></div>
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Architect-Engineer	City _____	Telephone No. _____																														
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<div style="text-align: center; font-weight: bold;">ADDITIONAL ACKNOWLEDGEMENTS</div> <ul style="list-style-type: none"> Except as provided by law, where any work has been started prior to obtaining this permit, the regular fee shall be doubled. This permit shall expire if work has not commenced or has been abandoned for 120 days. ALL WORK MUST BE INSPECTED. It is the responsibility of the permittee to call for inspections. No work shall be concealed or covered until approved by the inspector. The permittee acknowledges they are proficient in the performance of the work covered by this permit. Fill out this application and return to City Hall . 																																
<div style="background-color: #0056b3; color: white; padding: 2px; text-align: center; font-weight: bold;">SIGNATURE OF OWNER OR AGENT</div> <p style="font-size: 1.5em; font-weight: bold; margin-top: 5px;">X _____</p> <p style="text-align: right; margin-right: 50px;">Date _____</p>																																
<p style="color: red; font-weight: bold; text-align: center; margin-top: 10px;">For questions or to schedule an inspection call Veenstra & Kimm at 515-850-2980. Email: jvan@v-k.net (24 hour inspection notice is needed)</p> <p style="text-align: center; margin-top: 10px;">Notified DMWW _____ Notified Warren Co. _____</p> <p style="text-align: center; margin-top: 10px;">Payment Received Date: _____ Amount: \$ _____</p>																																
<p>PUD & Architectural Standards checked by (initial here): _____</p> <p>Building Official Approval: x _____ Date: _____</p>																																

City of Cumming

www.cumming.iowa.gov

TRADE PERMIT

Permit No.

PO Box 100, 649 N 44th ST. Cumming, IA 50061 | Ph: 515-981-9214 Fax: 515-981-4981 | deputyclerk@cumming.iowa.gov

Check all that apply

TYPE OF PERMIT: **Plumbing** **HVAC** **Electric**

Call V&K at (515) 850-2980 to Schedule an inspection

JOB ADDRESS	APPLICANT
Street Number/Name:	<input type="checkbox"/> Contractor/Company or <input type="checkbox"/> Homeowner
Owner/Tenant Name:	Name: _____ State License # _____
Phone Number:	Phone Number: _____
	Email Address: _____
	Postal Address: _____
	City /State/Zip: _____

DISCRIPTION OF WORK TO PERFORM
SIGNATURE OF OWNER/AGENT: X
DATE: _____

<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">PLUMBING \$75</td> <td style="width: 30%;">\$ _____</td> </tr> <tr> <td>HVAC \$75</td> <td>\$ _____</td> </tr> <tr> <td>ELECTRIC \$75</td> <td>\$ _____</td> </tr> <tr> <td>TOTAL</td> <td>\$ _____</td> </tr> </table> <p style="text-align: center; margin-top: 5px;">Submit application and fee to City Hall</p>	PLUMBING \$75	\$ _____	HVAC \$75	\$ _____	ELECTRIC \$75	\$ _____	TOTAL	\$ _____	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Amount Paid:</td> <td style="width: 40%;">\$ _____</td> </tr> <tr> <td>Check #</td> <td>_____</td> </tr> <tr> <td>Initials:</td> <td>_____</td> </tr> </table> <p style="margin-top: 10px;">Stamp</p>	Amount Paid:	\$ _____	Check #	_____	Initials:	_____
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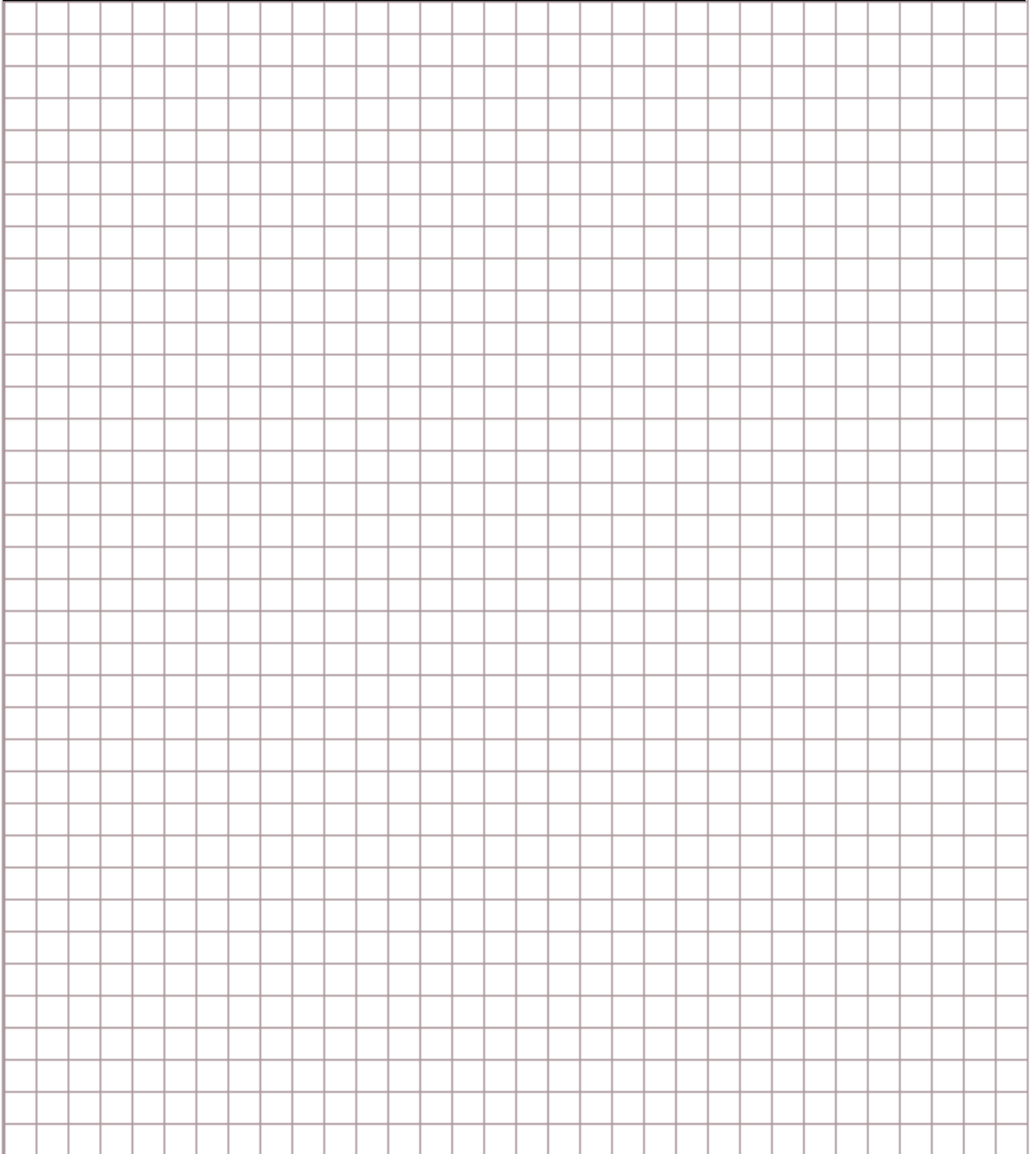
Special Notes:	
APPROVED BY: _____ <div style="text-align: center; margin-top: 5px;">Building Official</div>	DATE: _____

Permit shall expire if work is not commenced within 180 days or if work is abandoned for 120 days. It is the responsibility of the permittee to call for all inspections – **Phone 515-225-8000. 24-hour notice is required.** Permits are non-transferable. All work shall be performed by permittee or its employee. The person who pulls the permit is responsible for setting up inspections.

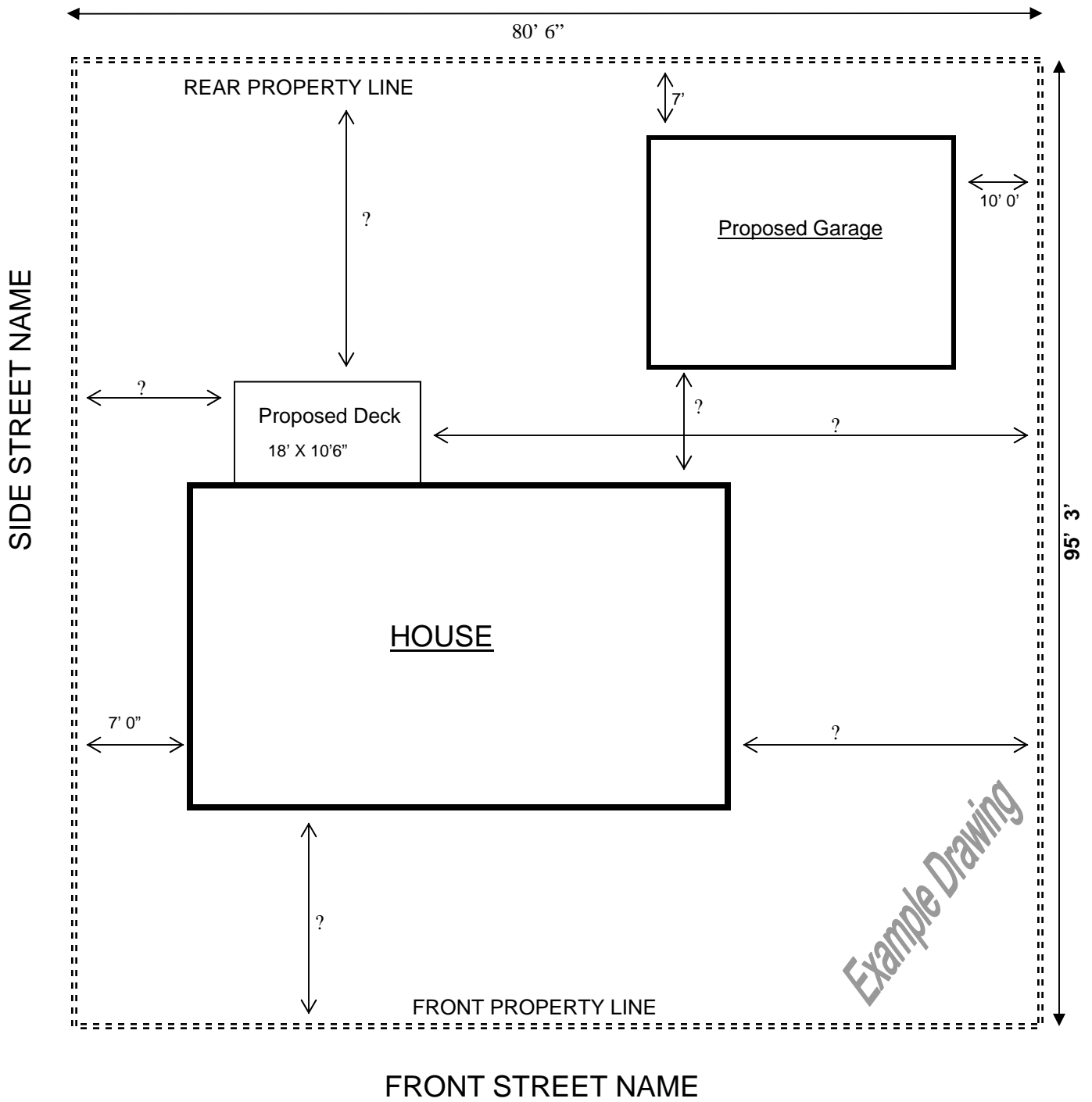
SITE PLAN

STREET ADDRESS: _____ USE OF BUILDINGS ON LOT _____

PROPOSED USE OF NEW IMPROVEMENT _____



Example Site Plan



Example Drawing

Site plans shall include distances from all building to all lot lines and distances from building to building.



REQUIRED BUILDING INSPECTIONS

(Residential New Construction)

Veenstra & Kimm Engineering

3000 Westown Parkway
West Des Moines, IA 50266-1320
515 850-2980

Permit required to be posted at front of structure on a post until it can be attached inside garage area.
Portable Toilet, posted house numbers and dumpster required on job sites.

FootingsPrior to pouring concrete, after forms and rods.

Footing Walls.....Prior to pouring concrete, non-centered uprights tied to center.

Deck post holes.....Prior to pouring, at least 42" deep (if attached to house.)

Electrical Temp Pole..... After pole in place, ground rods, GFI's installed, address label.*

Tar Tile Gravel.....Prior to Backfill (**may be inspected during plumbing ground work**)

Sewer/Storm/Water.....Drainage pipe with 5ft head, gravel bed, Tracer wire on PEX.

Groundwork.....5ft head wet test or air test, gravel bed, staked down.

Plumbing Rough.....Prior to insulation, wet test 5ft head or air test 5psi. Pex, air or water test.

Electrical Rough.....Prior to insulation, Ground, Panel & Meter box installed*.

HVAC Rough.....Prior to insulation

Framing Rough.....Prior to insulation, after all mechanicals roughed in.

Sidewalk & Approach.....Prior to pouring concrete, granular compacted gravel. Stop Box cap sleeved with metal.

Final..... Structure may not be occupied until Final Inspection, Energy Code Compliance Certificate, State Electric Final if applicable and Certificate of Occupancy has been issued.

May be done together

Call V&K at 515 850-2980 to schedule an inspection

Inspections are between 8:00 and 4:30pm M-F

*Note: City of Bondurant requires water meter set **before rough-in inspections**. Check with City Hall.
Temporary **safety railings** are required around open stairwells **before** mechanicals are installed!*

As of January 1st 2016 most cities will have adopted the 2015 IRC & IBC Building Codes, IPC Plumbing code and 2014 NEC. (State of Iowa inspects Electrical for cities listed below with an asterisk*).

**Bondurant – Cumming - Elkhart - Granger - Dallas Center – Martensdale – Mitchellville
Osceola - Oskaloosa - Panora* - Roland – Stuart* - Van Meter* - Woodward***

BUILDING PERMIT

INSPECTION RECORD

CITY OF CUMMING

SITE INFO

SITE ADDRESS _____

BUILDER _____ CONTACT# _____

PERMIT DATE: _____ PERMIT# _____

PROJECT DESCRIPTION: _____

INSPECTIONS

TYPE	DATE	TIME	INSPECTOR	Pass	Fail	COMMENTS
FOOTING						
FOUND. WALLS						
TAR/TILE/GRAVEL						
SEWER/WATER						
GROUNDWORK						
DECK FOOTINGS						
APPROACH						
SIDEWALK						
SHEAR WALL						
WATER METER						
PLUMBING						
ELECTRICAL						
HVAC						
FRAMING						
WATER SERV. INSP.						
FINAL						

Required Jobsite items: Temporary Address, Portable Toilet, Dumpster, **This form** and Fire Extinguisher (on commercial jobs).

Call Veenstra & Kimm to schedule inspections at least 24hrs in advance 515 850-2980

DOCUMENT MUST REMAIN ON JOBSITE