# City of Cumming

## **BUILDING PERMIT**

Permit #	

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

TYPE OF PERMIT: □Building □Shed □Deck □Pool □Other

		ATTACH SITE PLAN, DR	AWINGS, AND/OR BUILDING P	LANS						
	JOB SI	TE	BUILDING SQUARE FOOTAGE							
ADDR	RESS:		Level 1	Pool Size						
NAMI	-		Level 2	Deck sqf						
DATE			Finished	Garage/Shed						
		Banain Danielitian	Unfinished	Height						
□Ne	<del>_</del>	Repair Demolition	DESCRIPTION OF PROJECT:							
	oving Structure Commerc	22.00.00								
	ne-Family Two-Family	,								
'ropert	ty is in a Flood Plain? Yes	No Min Elevation MPE								
N	Name I	Email								
	Address I	Fax No.	PERMI	IT FEES						
Owner	City 1	Гelephone No.	BUILDING	<b>\$</b>						
0	Lity	retephone No.	SHED	\$						
S	State/Zip (	Cell No	DECK	φ						
N	Name Er	nail	POOL	\$						
<b>H</b> A	Address Fa	ıx No.		\$						
acto			TOTAL PERMIT FEE \$							
Contractor	City Te	elephone No.		NOWLEDGEMENTS						
	State/Zip Co	ell No.	Except as provided by law, where any work has been started prior to obtaining this permit, the regular fee shall be doubled.  This work has been started prior to obtaining this permit, the regular fee shall be doubled.							
,	Name -	nail	days.	t commenced or has been abandoned for 120						
er	Name Er	nan	ALL WORK MUST BE INSPECTED. It is the responsibility of the permitee to call for inspections. No work shall be concealed or covered until approved by the inspector.  The permitee acknowledges they are preficient in the performance of the work cover.							
ngin	Address Fa	x No.	The permitee acknowledges they are proficient in the performance of the work covered by this permit.							
Architect-Engine	City Te	elephone No.	Fill out this application and return to City Hall .  SIGNATURE OF OWNER OR AGENT							
hite		HAY.	X							
Arc	State/Zip Ce	ell No.		if you have any questions please						
C	Company Name:	Phone:	call Veenstra & Kimm at 51	5-850-2980. Email: jvan@v-k.net on notice is needed.						
tors		State Lic. #	•							
ntrac	Company Name:	Phone:		Notified Warren Co						
Sub-Contractors		State Lic. #	Payment Received Date:	Amount: \$						
Sub	Company Name:	Phone:	WHEN APPROVED BELOW,	THIS BECOMES YOUR PERMIT						
		State Lic. #	ISSUED BY:  BUILDING OFFICE	AL. DATE:						

# **City of Cumming**

### www.cumming.iowa.gov

IKADE	PEKMIII
Permit No.	

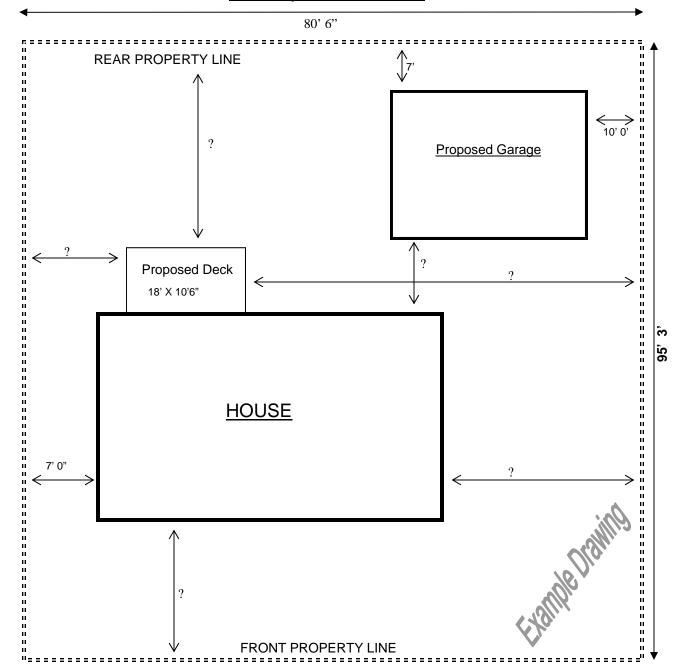
PO Box 100, 649 N 44th ST. Cumming, IA 50061 | Ph: 515-981-9214 Fax: 515-981-4981 | deputyclerk@cumming.iowa.gov

	Check all that app	у								
TYPE OF PERMIT	T: Plumbing	□HVAC	Electric							
	Call V&K at (515) 850-2980	to Schedule an inspection								
Ú	JOB ADDRESS	APPLICANT								
Street Number/Name:  Owner/Tenant Name:  Phone Number:		Contractor/Company o  Name:  Phone Number:  Email Address:  Postal Address:  City /State/Zip:								
SIGNATURE OF OWNER/AG	ENT:	DATE:								
PLUMBING \$75  HVAC \$75  ELECTRIC \$75  TOTAL  Submit app  Special Notes:	\$ \$ \$ \$ lication and fee to City Hall	Amount Paid: Check # Initials:	\$							
APPROVED BY:	Building Official	_ DAT	E:							

## **SITE PLAN**

	STREET ADDRESS: USE OF BUILDINGS ON LOT PROPOSED USE OF NEW INPROVEMENT													_								
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## **Example Site Plan**



### FRONT STREET NAME

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





SIDE STREET NAME

### 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.

	Footings	Prior 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.
ether	Plumbing Rough	Prior to insulation, wet test 5ft head or air test 5psi. Pex, air or water test.
May be done together	Electrical Rough	Prior to insulation, Ground, Panel & Meter box installed*.
oe dor	HVAC Rough	Prior to insulation
May k	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.

## 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 1<sup>st</sup> 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 IN	FO						
SITE ADDRESS										
BUILDER CONTACT#										
PERMIT DATE: PERMIT#										
PROJECT DESCRII	PTION: _									
			INSPECTIO	ONS						
ТҮРЕ	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**