

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

JOB SITE INFORMATION	APPLICANT INFORMATION									
Address: _____ Owner: _____ Owner Address: _____ Owner City/State/Zip: _____ Phone: _____ Email: _____	Company: _____ Address: _____ City/State/Zip: _____ Phone: _____ Email: _____									
<b><u>Type of Use</u></b>  <table style="width: 100%; border: none;"> <tr> <td style="width: 30%;"></td> <td style="width: 35%; text-align: center;"><b>Residential Project</b></td> <td style="width: 35%; text-align: center;"><b>Nonresidential Project</b></td> </tr> <tr> <td style="padding: 5px;"><b>Existing electrical Connections</b></td> <td style="text-align: center; padding: 5px;">Yes    No</td> <td style="text-align: center; padding: 5px;">Yes    No</td> </tr> <tr> <td style="padding: 5px;"><b>Existing water/sewer connections</b></td> <td style="text-align: center; padding: 5px;">Yes    No</td> <td style="text-align: center; padding: 5px;">Yes    No</td> </tr> </table>		<b>Residential Project</b>	<b>Nonresidential Project</b>	<b>Existing electrical Connections</b>	Yes    No	Yes    No	<b>Existing water/sewer connections</b>	Yes    No	Yes    No	Project Description: _____  _____  _____
	<b>Residential Project</b>	<b>Nonresidential Project</b>								
<b>Existing electrical Connections</b>	Yes    No	Yes    No								
<b>Existing water/sewer connections</b>	Yes    No	Yes    No								

1. Scope of work, signed permit and site plan attached.
2. All construction debris to be removed from site including foundation - inspection required prior to backfilling.
3. Water service shall be disconnected and capped @ curb stop - inspection required before cover-up.
4. Sewer service shall be disconnected and capped @ property line - Inspection required before cover-up.
5. Finish grading with at least 4" of topsoil is required and erosion controls placed.
6. Asbestos and/or other contaminants may impose additional requirements from outside agencies.
7. During demolition process, jobsite to be secure at the end of the day. (preferably an orange fence)

I agree to comply with and City and State regulations, accepts all responsibility for any issues that may arise during this project. 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. A new permit will be required. Permit expires if work has not been substantially completed within one year of issuance.

X _____ Date: _____ <u>SIGNATURE OF OWNER OR AGENT</u>	X _____ Date: _____ <u>PERMIT APPROVED AND ISSUED BY</u>
X _____ <u>PRINTED NAME</u>	PERMIT FEE \$ _____

Send completed form and site plans to City Hall at: [deputyclerk@cumming.iowa.gov](mailto:deputyclerk@cumming.iowa.gov)