



Residential Building Permit Application

BUILDING INSPECTIONS
 Midwest Inspection Services
 16553 37th ST SE Suite 5
 Mapleton, ND 58059
 Phone: 701-532-1078
 Fax: 701-532-1608

Please email completed applications to: midwestinspectionsservicesnd@gmail.com
 Incomplete applications will cause delays in the routing/review and permitting process.

Project Title*:		Office use only:	
Address:			
Project Value:			
Project Description:			
Owner:		Contact Person:	
Address:		Phone:	Fax:
		E-mail:	
Designer:		Contact Person:	
Address:		Phone:	Fax:
		E-mail:	
General Contractor:		Contact Person:	
Address:		Phone:	Fax:
		E-mail:	
ND Contractor License No.			
Foundation Contractor:		Mechanical Contractor:	
Phone:		Phone:	
E-Mail:		E-Mail:	
ND Contractor License No.		ND Contractor License No.	
Excavator:		Yard Grading Contractor:	
Phone:		Phone:	
Plumbing Contractor:		Electrical Contractor:	
Phone:		Phone:	

TYPE OF IMPROVEMENT:

New Construction Addition Remodel Demolition Move Repair Miscellaneous Temporary

PERMIT FOR:

Single Family Dwelling Two Family Dwelling (Separate Permit for each Unit) Townhouse (Units)
 Accessory Building Deck Residing Lower Level Finish Nonstructural Concrete
 Other (Please Explain:)

BUILDING/STRUCTURE SIZE:

Width Ft. Depth Ft. Height Ft. No. of Stories Basement Finished Yes No
Basement Floor Area SF Number of Bedrooms
Main Floor Area SF Number of Bedrooms
Second Floor Area SF Number of Bedrooms
Third Floor Area SF Number of Bedrooms
Garage Floor Area SF

# of Units	HVAC EQUIPMENT	TON'S/BTU's

BUILDING LOCATION ON SITE:

Property Zoning Designation Property Area SF
North Property Setback Distance Ft. Front Side Rear Adjacent to Public Way
East Property Setback Distance Ft. Front Side Rear Adjacent to Public Way
South Property Setback Distance Ft. Front Side Rear Adjacent to Public Way
West Property Setback Distance Ft. Front Side Rear Adjacent to Public Way

REQUIREMENTS FOR CONSTRUCTION IN FLOODPLAIN:

Is the Building Located in the Special Floodplain Hazard area? Yes No (If yes complete the following)
Base Flood Elevation Ft. Flood Protection Elevation Ft. Letter of Map Revision Issued Yes No
Acknowledgement Form Submitted Yes No

For Office Use Only

Septic Permit Required:

Yes No

Planning and Zoning Approval:

P.U.D. Yes No Conditional Use Yes No Overlay District Yes No
Date Approved

I hereby acknowledge that this application is not a Building Permit, nor does it authorize the start of construction.

Signature of Applicant Date