

## **CITY OF FAIRBANKS BUILDING PERMIT APPLICATION**

ECT NAME/NUMBER:									

APPLICANT TO COMPLETE NUMBER	RED SPACES ONLY	:	PLEASE PRI	NT		CE T		
1. DATE	2. JOB ADDRESS					OFFICE U		
2 LECAL DAN #	LOTNO BLV	CI IDDII IIC	ION		4 IODAIA			
3. LEGAL PAN # DESCRIPTION	LOT NO. BLK	SUBDIVIS	ION		4. JOB NAM	ЛЕ		
5. APPLICANT	MAIL ADDRESS	CITY/STA	TE/ZID	PHONE	FAX	EMAIL		
3. ATTLICANT	WAIL ADDRESS	CII I/SIA	I L/ZII	HONE	TAX	EWAIL		
6. OWNER	MAIL ADDRESS	CITY/STA	TE/ZIP	PHONE	FAX	EMAIL		
7. CONTRACTOR	MAIL ADDRESS	CITY/STA	TE/ZIP	PHONE	FAX	EMAIL		
8. ARCHITECT or DESIGNER	MAIL ADDRESS	CITY/STA	TE/ZIP	PHONE	FAX	EMAIL		
9. ENGINEER	MAIL ADDRESS	CITY/STA	TE/ZIP	PHONE	FAX	EMAIL		
10. PROPOSED USE (List # of Liv	ring Units if Applicable)	11. SQUAI	RE FOOTAG	GE		VALUE OF WORK PER	SECTION 304.2 CITY OF	
					FAIRBANKS ADM	FAIRBANKS ADMISTRATIVE CODE		
13. CLASS OF WORK ☐ SIGN	□ NEW □ ADDITI	ON ALTE	RATION	□REPAIR	☐ MOVE			
14. TAX REBATE PROGRAM:	IF YES, BACKGROUND	) INFO:						
15. DESCRIBE WORK:								
		]	NOTICE	E				
SEPARATE	E PERMITS ARE REQUIREI	D FOR STREET I	DIGGING, I	ELECTRICAL, I			RK	
THIS PERMIT BECOMES NULL AND IS NOT COMMENCED WITHIN 180 D					CONDITIO	ONS (OFFICE)		
AND NO INSPECTIONS ARE MADE WORK IS COMMENCED.	FOR A PERIOD OF 180 DAYS AT A							
I HEREBY CERTIFY THAT I HAVE	E READ AND EXAMINED THIS APP	PLICATION AND						
KNOW THE SAME TO BE CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OF NOT. THE CRANTING OF A PERMIT DOES NOT PRESUME TO GIVE		PERMIT FEES (OFFICE)						
HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY LAW REGULATING CONSTRUCTION, SETBACKS, EASEMENTS OR THE PERFORMANCE OF CONSTRUCTION.		FEE DESCRIPTION			FEE			
I AGREE THAT THE WORK WILL B		PPROVED PLANS,						
DEPARTMENT. IT IS THE DUTY OF	F THE APPLICANT TO INSURE TH	AT THE WORK IS						
	N THE INTERNATIONAL BUILDIN	G CODE.						
Note: The City of Fairbanks charges a c debit card transacti	convenience fee up to 3.6% (minimum sions not related to garbage collection.	\$2.50) on credit and						
			APPROVED	FOR ISSUE BY:		SUBTOTAL		
PRINT NAME AND TITLE (OWNER OR	OR CONTRACTOR)	DATE:				PLAN CHECK FEE		
						PERMIT FEE		
SIGNATURE OF OWNER, CONTRACTO	R OR AUTHORIZED AGENT	DATE:	DATE:			TOTAL FEE		
CITY OF FAIRBANKS BU	JILDING DEPARTMENT	800 CUSHMA	AN STREE	Γ, FAIRBANKS	S AK 99701	PHONE 459-6720	FAX 459-6719	