



PERMIT RENEWAL

APPLICATION

THE CITY OF WATFORD CITY
213 2ND ST NE / PO BOX 494
WATFORD CITY, NORTH DAKOTA

PERMIT NUMBER:

REQUIREMENTS: All applications must be legible, printed in ink or typed, and suitable for reproduction. *Original application with original Applicant signature is required.* Expired permits may only be renewed provided no changes have been made or will be made within the original plans and specifications of the originally issued permit. If original permit cards are still available, the cards must be returned along with this application. For specific details of Permit expiration and renewal, please refer to the *City of Watford City Municipal Code of Ordinances: CHAPTER XV ZONING ORDINANCE, ARTICLE XXIX ADMINISTRATION AND ENFORCEMENT, SECTION 2 BUILDING PERMITS REQUIRED, SUBSECTION C).*

PERMIT TYPE

Select the type of permit to be renewed.

<input type="checkbox"/>	BUILDING	<input type="checkbox"/>	OTHER/GENERAL
<input type="checkbox"/>	CONSTRUCT / REPAIR	<input type="checkbox"/>	SEPTIC
<input type="checkbox"/>	DEMOLITION	<input type="checkbox"/>	SIGN
<input type="checkbox"/>	EXCAVATION	<input type="checkbox"/>	STORAGE
<input type="checkbox"/>	FENCE	<input type="checkbox"/>	WATER & SEWER ACCESS
<input type="checkbox"/>	MOVING		

PROPERTY INFORMATION

PROPERTY ADDRESS:		ZONING DISTRICT:	
PARCEL NUMBER:	SUBDIVISION:	LOT #	BLOCK #
LEGAL DESCRIPTION: (SECTION, TOWNSHIP, RANGE)	IS PROPERTY ANNEXED? <input type="checkbox"/> YES <input type="checkbox"/> NO / E.T.A.	LOCATED IN FLOODPLAIN? <input type="checkbox"/> YES* <input type="checkbox"/> NO <small>*IF YES, A FLOODPLAIN DEVELOPMENT PERMIT IS REQUIRED.</small>	

PROPERTY OWNER INFORMATION

OWNER NAME:	PHONE NUMBER:	EMAIL:
MAILING ADDRESS:		

PERMIT APPLICANT INFORMATION Same as Owner

APPLICANT NAME:	PHONE NUMBER:	EMAIL:
MAILING ADDRESS:		

CONTRACTOR INFORMATION

CONTRACTOR NAME:	PHONE NUMBER:	EMAIL:
MAILING ADDRESS:		
NORTH DAKOTA CONTRACTORS LICENSE NUMBER: _____ CLASS: _____	WATFORD CITY CONTRACTORS BUSINESS LICENSE NUMBER: _____	

DESCRIPTION

Please give a brief description of the remaining work.

PERMIT RENEWAL FEE: \$20.00

NOTICE: All applications, fees, and plans are subject to review, verification, and approval by the City Planning, Building, Engineering, and Public Works Departments prior to accepting payment and issuing permits. ALL PAYMENTS MADE TO THE CITY WILL BE NON-REFUNDABLE, NON-TRANSFERABLE ONCE THE PERMIT IS ISSUED. Please do **NOT** send payment until this application has been reviewed by the City.

SIGNATURE

As the applicant, I certify that all information given on this application is correct, all City Ordinances and Building Codes will be complied with and Utility Companies have been notified as necessary (811). Inspections are a required part of the permitting process and I understand that as a permit holder, it is my responsibility to notify The City when any such inspections need to be performed. Thus, I hereby give authorization to City Staff to access my permitted property as necessary and certify that I will not occupy the structure or property without first obtaining proper inspection(s) and/or the issuance of a Certificate of Occupancy or Final Inspection from the City Building Official. I understand that the City Building Official has the right to hold my Certificate of Occupancy/Final Inspection until all said requirements and conditions have been deemed satisfactorily completed and all fees associated with the permitting and/or inspection processes have been paid in full. I also understand that once my permits are issued, all payments made to The City will be non-refundable and non-transferable.

APPLICANT SIGNATURE:

DATE:

____/____/____

APPLICATION VERIFIED BY: _____

DATE: ____/____/____