

Application Date _____

Application # _____

1. Location of Building	_____ Number and Street Tax Map Number Parcel Number _____ Dimensions of Lot _____ Are there any other structures on this lot? _____ If yes, a site plan or sketch plan is required.						
2. Zoning	What zone is the lot in? _____ If residential: how many units are proposed? _____ Is the lot in a flood hazard area? _____ If yes, what is the 1st floor elevation? _____ What is the proposed use of the lot? _____						
3. Type of Improvement	<input type="checkbox"/> New Structure <input type="checkbox"/> Wrecking <input type="checkbox"/> Alteration <input type="checkbox"/> Addition <input type="checkbox"/> Moving <input type="checkbox"/> Repair						
4. Ownership	<table style="width:100%; border:none;"> <tr> <td style="width:50%; border:none;">Public:</td> <td style="width:50%; border:none;">Private:</td> </tr> <tr> <td style="border:none;"><input type="checkbox"/> Federal <input type="checkbox"/> County</td> <td style="border:none;"><input type="checkbox"/> Taxable</td> </tr> <tr> <td style="border:none;"><input type="checkbox"/> State <input type="checkbox"/> City</td> <td style="border:none;"><input type="checkbox"/> Tax Exempt</td> </tr> </table>	Public:	Private:	<input type="checkbox"/> Federal <input type="checkbox"/> County	<input type="checkbox"/> Taxable	<input type="checkbox"/> State <input type="checkbox"/> City	<input type="checkbox"/> Tax Exempt
Public:	Private:						
<input type="checkbox"/> Federal <input type="checkbox"/> County	<input type="checkbox"/> Taxable						
<input type="checkbox"/> State <input type="checkbox"/> City	<input type="checkbox"/> Tax Exempt						
5. Cost	Estimated Total Cost of Improvement _____						
6. Size of Building	# of Feet Front _____ # of Feet Rear _____ # of Feet Deep _____						
7. Setbacks	Setback from property line: Front _____ Side _____ Rear _____						

	NAME	MAILING ADDRESS	TELEPHONE
Owner	_____	_____	_____
Contractor	_____	_____	_____
Engineer	_____	_____	_____

I hereby certify that I have the authority to make the above application, that the application is correct, and that the construction will conform to the Dunlap Zoning Ordinance.

Signature of Owner or Authorized Agent

FOR OFFICE USE ONLY — To be completed by Field Superintendent and/or Health Dept. Environmentalist

Is City Water available to site? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is City Sewer available to site? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is Septic on site? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is Back Flow Prevention required? <input type="checkbox"/> Yes <input type="checkbox"/> No	Grease trap? <input type="checkbox"/> Yes <input type="checkbox"/> No
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If City Water and/or Sewer are not available at the site, the Sequatchie County Environmentalist must give his approval before a building permit will be issued.

Signature of Field Superintendent

Signature of Environmentalist, if needed