

Dunn County Community Development Department

205 Owens Street

Manning, ND 58642 dunncountynd.org

Building Department * Phone: 701-260-5373

Planning Division * Phone: 701-573-4609

Permit No: _____

COMMERCIAL BUILDING APPLICATION

(ALL INFORMATION IS REQUIRED)

Plan Submittal Requirements: You must submit **Two (2)** sets of adequate plans and specifications. Plans and specifications must be drawn to scale, must clearly indicate the location, nature, and extent of the work proposed and must show in detail that it will conform to the provisions of the International Building Code.

Plans Shall Include:

1. **A site plan** with the location of the proposed building and all existing buildings. It must include distances between buildings, to property lines, streets, roads, alleys, etc. If required, a handicap accessible route and parking space(s) must also be shown on the site plan.

2. **A dimensioned floor plan** showing interior and exterior walls, opening location and size, operating windows, door swings, door hardware, exit sign locations, and handicapped toilet rooms.

3. **Identification of the use of each room or area** of the building, with a list of materials or supplies to be used or stored, and a description of any product to be manufactured or installed.

4. **A dimensioned typical section** through the structure showing footings, foundation, walls, floor, ceilings, roof materials, and details. The roof and floor framing plans must show size and spacing all members.

5. **Materials specification** as appropriate, for example, roofing materials, sheetrock type and thickness, door type and rating, etc.

Received:

Other Submittal Requirements:

1. A completed [ADA](#) Form
2. The address of the property must be **recorded**.
3. **List of utility providers.** (Sewer, Gas, Water, Electrical)
4. A **Subcontractor List** must be submitted.

1. PROJECT INFORMATION

Project Title:	
Address:	
Legal Description:	Parcel Number:
Owner of Property:	
Owner Address:	Phone Number(s):

2. CONTRACTOR INFORMATION

Company:
Name of Jobsite Supervisor:
Phone Number:
ND Contractor License Number:

3. PROJECT DESCRIPTION

Type of Work: check box that applies	<input type="checkbox"/> New Construction	<input type="checkbox"/> Alteration	<input type="checkbox"/> Addition	<input type="checkbox"/> Demolition
Location of Work: (i.e.: Floor, Level)	SF of Work Being Done:			
Describe in detail work being done:				

4. FEE INFORMATION

	Name & Lic. No.	Bid Amount
General Contractor		
	Total Project Cost:	
Building Permit Fee: Plan Review Fee (65%): Other Fees: Total Permit Fee:	Paid:	Credit Card Check Cash Received By:

A member of the Building Inspections Division will notify you when the permit has been created. All permits must be picked up and a **signature is required**. You will be required to post an address sign as well as a copy of the approved permit in a conspicuous place prior to any inspections. Any information that the applicant has set forth in this application that is false or misleading may result in the rejection of the application. A condition for the issuance of this permit is that the proposed construction will comply at all times with the plans as approved by all applicable government agencies.

I hereby declare and affirm that all matters and facts set forth in this application are true and correct to the best of my knowledge, information and beliefs.

Signature

Date

5. ZONING/ASSESSING INFORMATION (for office use only)

<input type="checkbox"/> New	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration	<input type="checkbox"/> Demolition	<input type="checkbox"/> Miscellaneous
Occupancy Group:	Division:	Census Code:	Ownership:	# of Units:
Building Height:	Construction Type:	Front Width:	Rear Width:	Building Width:
Zoning:	Average Depth of Lot:	Lot Area (sq ft):		
Easement:				
Front Yard Setback	Side Yard Setbacks	Rear Yard Setback		
Area of Main:	Finished Area:	Finished Area Alt / Add:		
# Required Parking Spaces	Area Required Parking:	Total Area:		
Zoning Approval Signature:	Date:			

6. BUILDING CODE INFORMATION (for office use only)

Occupancy Classification:	Change of Occupancy:
Type of Construction:	Allowable Area:
Building Stories / Height:	Mixed Occupancy:
Building Area:	Occupant Load:
Fire Protection Systems	Area Increase
Alarm:	Frontage
Sprinkler:	Sprinkler
Fire Resistance Rating Requirements	

PROJECT REVIEW

Reviewed By:

Project Title:

Address:

Comments:

A member of the Building Department will inform you when the permit has been created. Your signature is required when you pick up the permit. The property must be clearly identified with an address prior to inspection. Any information the applicant has set forth in this application that is false or misleading may result in the rejection of the application or revocation of the permit. A condition for the issuance of this permit is that the proposed construction will comply at all times with the plans as approved by all applicable government agencies.

I hereby declare and affirm that all matters and facts set forth in this application are true and correct to the best of my knowledge, information and beliefs.

Signature

Date

This permit application and associated plans have been reviewed for compliance with the Code. All work associated with this permit is subject to field inspection by certified individuals during the course of construction. Issuance of this permit is in no way granting any portion of the proposed work to be completed in a manner contrary to the Code. Construction must commence within (six) months.