BURLEIGH COUNTY
BUILDING/PLANNING /ZONING
DEPARTMENT
COMMERCIAL BUILDING PERMIT APPLICATION

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 service to be performed.
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. **A completed ADA Form**

PROJECT INFORMATION:

PROJECT TITLE:

ADDRESS:

LEGAL DESCRIPTION:

OWNER OF PROPERTY:

IS PROPERTY LOCATED IN THE FLOOD PLAIN ☐ **NO** ☐ **YES** **ELEVATION:**

CONTRACTOR INFORMATION:

COMPANY: CONTACT:

ADDRESS PHONE NUMBER:

JOB SITE SUPERVISOR PHONE NUMBER:

ND CONTRACTOR LICENSE NUMBER:
(MUST HAVE ND CONTRACTORS LICENSE TO COMPLETE WORK OVER $2,000.00)

221 N. 5TH STREET, PO BOX 5518, BISMARCK, ND 58506
701-221-3727 FAX 701-221-3726 WWW.BURLEIGHCO.COM

PROJECT DESCRIPTION:

TYPE OF WORK:
CHECK BOX THAT APPLIES: ☐ NEW CONSTRUCTION ☐ ALTERATION ☐ ADDITION ☐ DEMOLITION

LOCATION OF WORK: (I.E. FLOOR, LEVEL)	SQ. FT. OF WORK BEING DONE:

DESCRIBE IN DETAIL WORK BEING DONE:

FEE INFORMATION:

	NAME OF CONTRACTOR	BID AMOUNT
GENERAL CONTRACTOR (ALL COSTS EXCLUDING SUBS LISTED BELOW)		
ELECTRICAL CONTRACTOR (MUST CALL 701-328-9522 FOR PERMIT)		
PLUMBING CONTRACTOR		
SEPTIC SYSTEM CONTRACTOR		
MECHANICAL CONTRACTOR		
FIRE SUPPRESSION CONTRACTOR		
	TOTAL PROJECT COST:	

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 given an address card at this time which must be posted on site prior to inspection. Any information the applicant has set forth in this application that is false or misleading may result in 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

ZONING/ASSESSING INFORMATION (FOR OFFICE USE ONLY)

☐ NEW ☐ ADDITION ☐ ALTERATION ☐ DEMOLITION ☐ MISCELLANEOUS

OCCUPANCY GROUP:	DIVISION:	CENSUS CODE:	OWNERSHIP	# OF UNITS

BUILDING HEIGHT:	CONSTRUCTION TYPE	FRONT WIDTH:	REAR WIDTH	BUILDING WIDTH

ZONING DISTRICT:	AVERAGE DEPTH OF LOT:	LOT AREA (SQ FT)

EASEMENT:

FRONT YARD SETBACKS	SIDE YARD SETBACKS	REAR YARD SETBACK
AREA OF MAIN	FINISHED AREAS	FINISHED AREA ALT/ADDITION
# REQUIRED PARKING SPACES	AREA REQUIRED - PARKING	TOTAL AREA

BUILDING CODE INFORMATION (FOR OFFICE USE ONLY)

OCCUPANCY CLASSIFICATION	CHANGE OF OCCUPANY:
TYPE OF CONSTRUCTION	ALLOWABLE AREA
BUILDING STORIES/HEIGHT	MIXED OCCUPANCY
BUILDING AREA	OCCUPANT LOAD
FIRE PROTECTION SYSTEM	AREA INCREASE
ALARM:	FRONTAGE
SPRINKLER	SPRINKLER

FIRE RESISTANCE RATING REQUIREMENTS

COMMENTS:

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PROJECT REVIEW:	
REVIEWED BY:	
PROJECT TITLE:	
ADDRESS	
COMMENTS:	
SIGNATURE	DATE

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