

405 Walnut St. PO Box 100 De Soto, IA 50069 | Ph: 834-2233 Email: cityclerk@desoto-ia.org  $\square$  Pool **TYPE OF PERMIT:** □ Building □ Fence □ Shed □ Deck □ Other ATTACH SITE PLAN, DRAWINGS, AND/OR BUILDING PLANS **JOB SITE BUILDING SQUARE FOOTAGE** Level 1 Pool Size ADDRESS: Deck sqf Level 2 NAME: Finished B Garage/Shed DATE: Unfinished B **□**Commercial □Industrial □Public **DESCRIPTION OF PROJECT:** □One-Family ☐ Two-Family ☐ Multi (No. \_\_\_ ZONING/DISTRICT Is property in a Flood Plain? ☐Yes ☐No MPE Elevation \_\_\_ Name Email Address Fax No **PERMIT FEES** City Telephone No. **FENCE** State/Zip Cell No **SHED** Name Email **DECK** Address Fax No. POOL SIDE 2 City Telephone No. TOTAL FEE's \$ Cell No. State/Zip ADDITIONAL ACKNOWLEDGEMENTS Except as provided by law, where any work has been started prior to obtaining this Name Email permit, the regular fee shall be doubled. Architect-Engineer This permit shall expire if work has not commenced or has been abandoned for 120 Address Fax No. ALL WORK MUST BE INSPECTED. It is the responsibility of the permitee to call for inspections. No work shall be concealed or covered until approved by the inspector. The permitee acknowledges they are proficient in the performance of the work cov-City Telephone No. ered by this permit. Fill out this application and submit with PDF plans to City Hall. State/Zip Cell No. SIGNATURE OF OWNER OR AGENT Company Name: Phone: DATE: State Lic. # Sub-Contractors To schedule an inspection for anything other than a shed or fence, please call Veenstra & Kimm at 515-850-2980. Company Name: Phone: Email: buildinginspection@v-k.net. A 24 hour inspection notice is needed. Sheds and fences are inspected by the City. State Lic. # ☐ Payment Received Date: \_\_\_\_\_ Amount: \$ \_\_\_\_ Company Name: Phone: WHEN APPROVED BELOW, THIS BECOMES YOUR PERMIT

State Lic. #

BUILDING OFFICIAL

DATE:\_

ISSUED BY: