



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:

CONTACT E-MAIL:

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: <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> ALTERATION <input type="checkbox"/> ADDITION <input type="checkbox"/> 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)				
<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 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:				

