Girard Township BUILDING PERMIT APPLICATION

DATE:		NO:	NO:	
PERMIT EXPIRATION DATE:				
APPLICANT'S NAME:		PHONE:		
MAILING ADDRESS:				
MAILING ADDRESS:	truction is to take:		The application and permit expire one year from date issued. Project is expected to be completed within the year the permit is valid.	
Legal Description or Address of property	<i>/</i> :			
Section:	Township:		Range:	
Number of acres or square feet:				
Building Description:		Width:	Length:	
☐ One or Two Family Dwelling, do	escribe:			
Agricultural, describe:				
Other, describe:				
Estimated construction start date:	onstruction start date: Estimated Completion:			
Estimated construction cost:				
I will comply with all a	pplicable laws, regul	ations, and ordina	nces for this project.	
			Applicant's signature	
	Building P	ermit		
A building permit is hereby approved an and regulations, are met in the construulations is the responsibility of the appl	ction of said structure, and a	•	• •	
Date:		Town Build	ing Commissioner (Board Chairman)	
Fee: \$150.00			Girard Township	