

SHED

SHEDS:

- Type of shed
 1. Pre-Fabricated
 - Provide manufacturers specifications
 - wind load- indicate how the shed will be anchored to the ground to withstand a 90mph wind
 - note material used
 - location of material
 2. Stick-built
 - lumber size
 - lumber spacing
 - roof detail
 - lumber size and spacing
 - span
 - pitch
 - roofing material
 - attachments
 - location of attachments
 - size of attachments
 - wind load- indicate how the shed will be anchored to the ground to withstand a 90mph wind
 - note material used
 - location of material

SITE PLAN:

- Indicate property lines
- Name adjacent streets
- Show proposed and existing structures
- Note setbacks around structure to property lines
- Show dimensions of structures

City of Morgantown Application

Plan Review

Submittal Date

___/___/___

Type of Work: Demo Asbestos New SFD New COMM

Garage Addition Deck Sprinkler Fire Alarm Grading

Remodel or Repair Shed Other

Property Information

| | |
|---|----------------|
| Street Address Where Work will be done: | Morgantown, WV |
| Contact EMAIL: | |

Square ft of Build

Cost of Project

Sprinkler Head Count

SIGNATURE OF APPLICANT

ADDRESS OF APPLICANT

PRINT NAME

PHONE

OFFICE USE ONLY

| |
|----------------|
| PERMIT: |
|----------------|

| | |
|-------------------|-----------------------|
| New SFD: | FIRE New COMM: |
| New COMM: | Sprinkler: |
| Garage: | Fire Alarm: |
| Addition: | Sign: |
| Site Plan: | Other: |

Application Processed By: _____

DATE

| |
|------------------|
| Total Fee |
|------------------|

City of Morgantown Application for Building Permit

| | | |
|---|---|-------------------------------------|
| Application Date ____/____/____ | Type of Work: <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> Demo <input type="checkbox"/> Deck <input type="checkbox"/> Mechanical <input type="checkbox"/> Grading <input type="checkbox"/> Asbestos <input type="checkbox"/> Remodel or Repair <input type="checkbox"/> Shed <input type="checkbox"/> Other | Is Applicant Owner? (Y/N) |
|---|---|-------------------------------------|

| | | |
|---|--------------------|---|
| PROPERTY INFORMATION: | | Parcel Type: <input type="checkbox"/> Residential <input type="checkbox"/> Rental/ Commercial <input type="checkbox"/> Industrial |
| Street Address Where Work is being done: | | Zip Code: |
| Morgantown, WV | Owners First Name: | Last Name: |
| Owners Address (if different from above address): | | Phone: |

| CONTRACTORS INFORMATION: | Contractors Business Name | City License Number |
|---------------------------|----------------------------------|----------------------------|
| General Contractor | | |
| Excavation | | |
| Concrete | | |
| Carpentry | | |
| Electrical | | |
| Plumbing | | |
| Sewer | | |
| Mechanical | | |
| Roofing | | |
| Masonry | | |
| Drywall/Lathing | | |
| Demolition | | |
| Other | | |

SCOPE OF WORK TO BE DONE:

| |
|---|
| Detailed Description of Work: |
| |
| |
| |
| |
| |
| |
| MUST ATTACH DETAILED SITE PLAN <input type="checkbox"/> YES <input type="checkbox"/> NO Est. Value of Work \$ |

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to this permit.

| | | |
|--------------------------|----------------------|-------|
| SIGNATURE OF APPLICANT | ADDRESS OF APPLICANT | PHONE |
| PRINT NAME: _____ | | |

OFFICE USE ONLY:

| | | | |
|-------------------|---------------|-------------|--------------------|
| Map/Parcel | Zoning | Ward | Flood Plain |
| | | | |

APPROVALS:

Engineering Department Approval Notes:

Signature of person reviewing: _____ **DATE**

Planning Department Approval Notes:

Signature of person reviewing: _____ **DATE**

Code Enforcement Approval Notes:

Signature of person reviewing: _____ **DATE**

VALIDATION:

| | |
|-------------------------|-----|
| Permit Number: | Fee |
| Other: | Fee |
| Stop Work Order: | Fee |

Application Accepted and Processed By: _____

| |
|------------------|
| Total Fee |
|------------------|

Approved By: _____ **DATE**

Signature of Person Picking Up Building Permit: _____ **DATE**

Print Name of Person Picking up Permit: _____