



Engineering Department
P.O. Box 128
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Coalville, Utah 84017
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www.summitcounty.org

CONSTRUCTION PERMIT APPLICATION FORM

Owner(s) of Record:

Name: _____ Phone: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

E-Mail Address: _____ Fax: _____

Authorized Representative to Whom All Correspondence is to be Sent:

Name: _____ Phone: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

E-Mail Address: _____ Fax: _____

Project Information:

Parcel #: _____ Subdivision Name: _____

Address: _____ Section: _____ Township: _____ Range: _____

Project Description (acreage, building square footage, number of lots, etc.):

	FEE AMOUNT	DATE PAID
Plan Review Fee	_____	_____
Construction Inspection Fee	_____	_____
MS4 Documentation Review Fee	_____	_____
LTSWMP Fee	_____	_____
MS4 Inspection Fee	_____	_____
Transportation Impact Fee	_____	_____
Weed Control Plan Fee	_____	_____

OWNER(S) ACKNOWLEDGEMENT

PLEASE NOTE REGARDING FEES; the payment of fees and /or the acceptance of such fees by County Staff does not constitute any sort of approvals, vesting, or signify that the application is complete or appropriate in any manner. The collection of fees is simply a requirement to begin the review process that will ultimately make such determinations.

I hereby declare under penalty of perjury that this application form, and all information submitted as part of this application form is true, complete, and accurate to the best of my knowledge. Should any information or representation submitted in connection with this application form be incorrect or untrue, I understand that Summit County may rescind any approval or sufficiency determination or take other appropriate action.

Owner(s) Signature: _____ **Date:** _____
