CITY OF MILBANK ROOFING PERMIT APPLICATION

PERMIT NUMBER_

THE APPLICATION WILL BE RETURNED IF NOT COMPLETED IN FULL. LANDOWNERS ARE RESPONSIBLE FOR LOCATING LOT LINES AND/OR SURVEYING THEIR YARDS.

ADDRESS:	
EMAIL:	
LEGAL DESCRIPTION: SUBDIVISION	BLOCKLOT
STREET ADDRESS: (if different than applicant/ow	ner)
EXISTING ZONING:	LOT DIMENSIONS: WIDTH DEPTH
TYPE OF APPLICATION: (check all that apply)	NEW STRUCTUREALTERATION/ADDITION
TYPE OF MATERIAL USED:ASPHALT SHING	LESSTEEL ROOFINGOTHER
IF STEEL ROOFING IS BEING USED, PLEAS	E SPECIFY THE FOLLOWING
TYPE (R-PANEL, D-RIB, A-PANEL	, ETC.)
COLOR	_
BRAND	_
PLACE OF PURCHASE	
ESTIMATED PROJECT CONSTRUCTION COST: (inc	luding labor) \$
	iplied with whether specified herein of flot. The granting of a permit
construction or the performance of construction. SIGNATURE OF CONTRACTOR DATE	
construction or the performance of construction. SIGNATURE OF CONTRACTOR DATE	I the provisions of any other federal, state, or local law regulations SIGNATURE OF OWNER DATE
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SIGNATURE OF CONTRACTOR DATE Use a separate sheet, if necessary, to list all contractor FOF Water Supt	SIGNATURE OF OWNER DATE S. OFFICE USE ONLY Ward Councilperson
SIGNATURE OF CONTRACTOR DATE Use a separate sheet, if necessary, to list all contractor FOF Water Supt Wastewater Supt The applicant shall contact South Dakota One Contractor Output Date FOF	SIGNATURE OF OWNER DATE S. Ward Councilperson Administrative Official Call System for the location of buried utilities, a minimum of 48 cture shall be located over any utility lines or equipment without
SIGNATURE OF CONTRACTOR DATE Use a separate sheet, if necessary, to list all contractor Water Supt Wastewater Supt The applicant shall contact South Dakota One Chours prior to the start of construction. No struprior approval from the appropriate utility compa	SIGNATURE OF OWNER DATE S. Ward Councilperson Administrative Official Call System for the location of buried utilities, a minimum of 48 cture shall be located over any utility lines or equipment without
SIGNATURE OF CONTRACTOR DATE Use a separate sheet, if necessary, to list all contractor FOF Water Supt Wastewater Supt The applicant shall contact South Dakota One Chours prior to the start of construction. No struprior approval from the appropriate utility compa	SIGNATURE OF OWNER DATE SOFFICE USE ONLY Ward Councilperson Administrative Official Call System for the location of buried utilities, a minimum of 48 cture shall be located over any utility lines or equipment without any. (SD One Call 1-800-781-7474)

Parcel ID#_____