

City of Montpelier Building Permit Application- Long Form

Section D, Building Information: *Complete for all permits: new construction, renovation, alterations.*

<p>Indicate the Building Construction Type:</p> <p><input type="checkbox"/> Type 1: Noncombustible <input type="checkbox"/> A <input type="checkbox"/> B</p> <p><input type="checkbox"/> Type 2: Noncombustible <input type="checkbox"/> A <input type="checkbox"/> B</p> <p><input type="checkbox"/> Type 3: Noncombustible/Combustible <input type="checkbox"/> A <input type="checkbox"/> B</p> <p><input type="checkbox"/> Type 4: Combustible, Heavy Timber</p> <p><input type="checkbox"/> Type 5: Combustible (Ordinary Wood Frame) <input type="checkbox"/> A: Protected <input type="checkbox"/> B: Unprotected</p> <p>Refer to the Building Code (IBC) for determining the construction type.</p>	<p>Structural Loads</p> <p>Roof Snow Loads _____</p> <p>Floor Loads _____</p> <p>Wind Load _____</p> <p>Refer to the Building Code for determining loads</p>
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Fire Protection Systems, If Any?

Fire Alarm: Manual Automatic Detection Single Station Smoke Detection

Sprinkler: Complete Limited Area Standpipes: Yes No

Other: _____

Occupancy Classification: _____ **Occupant Load:** _____

<p>Square Footage of Largest Story: (new and existing) _____</p> <p>Building Height: _____</p> <p>Number of Floors: _____</p>	<p>(a.) Existing Square Footage: (Including basements) _____</p> <p>(b.) Addition Square Footage: (Including basements) _____</p> <p>(a. + b. =) Total Square Footage: _____</p>
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Number of Units: _____ **Heating System(s):** _____

Type of Water Supply: Public , Private New Existing

Type of Sewage Disposal: Public , Individual New Existing

If this building is historically significant, indicate below and provide complete documentation of historical listings:

Listed on the National Register of Historic Places. Listed on the State Register of Historic Places.

Historically significant, as determined by the Vermont Advisory Council on Historic Preservation.

Section E, Energy Conservation Certification: *Complete for all state funded projects.*

I, _____ certify that this new state-funded building or addition meets the standards contained in "The Vermont Guidelines for Energy Efficient Commercial Construction" as published in it's most recent edition by the Department of Public Service.

For more information on energy conservation, contact the Department of Public Service at 1-888-373-2255.

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Section F, Project Valuation and Permit Fee: *Complete for all permits. Make check payable to the City of Montpelier, and include it with this application. No application will be processed without the fee.*

I, _____ certify that the total valuation of the construction work is as follows:
(Applicant's Name – Print or Type)

The Permit Fee is based on the total valuation of improvements or new construction for which the permit is being obtained. For projects involving volunteer labor and donated material, the valuation of construction work is based on the value of the volunteer labor as well as the donated materials when calculating the permit fee.	a. Site work	\$
	b. Valuation of building construction	\$
	c. Fixed equipment, installed	\$
	d. Electrical	\$
	e. Plumbing	\$
	f. Other fire suppression systems	\$
	g. Heating and Air Conditioning	\$
	h. Fire alarm system	\$
	i. Consulting services	\$
	j. Other:	\$
Sprinkler system costs (no Fee) \$	K. TOTAL PROJECT COST	\$

Permit Fee Calculation Permit fee will be adjusted to reflect actual as built costs prior to the issuing of a Certificate of Occupancy.

Calculate the permit fee using line 1, if the project involves a single family owner occupied home or if a State Construction Permit is required:

1. Enter TOTAL PROJECT COST (line k) \$ **Fee is \$10.00 for first \$1,000.00 and \$3.50 for each \$1,000.00 or portion thereof.**

Fee \$ _____

Calculate the permit fee for all other projects using line 2:

2. Enter TOTAL PROJECT COST (line k) \$ **Fee is \$10.00 for first \$1,000.00 and \$8.50 for each \$1,000.00 or portion thereof.**

Fee \$ _____

Section G, Applicant, Project Contractor and Designer Information:
Complete for all construction projects.

General Contractor:		
<i>Name</i>	<i>Address</i>	<i>Phone</i>
Architect or Engineer or Other Designer:		
<i>Name</i>	<i>Address</i>	<i>Phone</i>

Anticipated start date of project: _____

Anticipated completion date of project: _____

Applicant's Company Name: _____		
Contact Person: _____	Position: _____	
Address: _____		
City: _____	State: Zip: _____	E-mail: _____
Phone Number: _____	Fax: _____	Cell: _____

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I hereby certify that the information contained within this application is correct and accurate.

Signature of Applicant: _____ **Date:** _____

*** FOR OFFICE USE ONLY ***

Permit #	State Site#	Received Date:	Reviewer:
Check #	State Project #	Issue Date:	Expiration Date:
Check From:	Amount		

Reviewed by:

Zoning Adm.: _____ Date _____

Comments _____

Public Works Director: _____ Date: _____

Comments: _____

Building Inspector: _____ Date: _____

Conditions with Permit: yes no

Original: Building Inspector

Copies to: Applicant, Assessor's Office, Finance,