

## **City of Shueyville, Iowa**

### **Building Permit Application Process & Requirements**

**1. Permit Application:**

Permit Application for Shueyville  
Johnson County Building Permit  
General Home Description  
Home Owner's & Developer Sign-off

**2. Submit 2 Identical Building Plans**

**3. Submit Site Plan with Set Back information-where building will be built**

**4. Pay Fee, \$150 plus \$35 for E911 Sign (\$185 total)**

**5. Submit Shueyville permit to Johnson Co. and sign-off sheet from Shueyville**

\*Shueyville will keep a copy of the application, building and site plans for our files

#### **Special Note from Shueyville City Council:**

Please be aware that there is to be no work of any kind on the property until you have the permits. This includes moving dirt to get the area ready, new driveway, digging a basement etc.

**There is a City Ordinance in place that doubles your fee every day that there is any type of work done without a permit**



# BUILDING PERMIT APPLICATION

913 S Dubuque St, Suite 204  
Iowa City, IA 52240  
Phone: (319) 356-6085  
Fax: (319) 356-6084

**STAFF USE ONLY**  
Received by: \_\_\_\_\_  
Permit #: \_\_\_\_\_

Job Site Address \_\_\_\_\_

Lot # & Subdivision \_\_\_\_\_ Parcel # \_\_\_\_\_

Applicant \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City/St/Zip \_\_\_\_\_

Owner \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City/St/Zip \_\_\_\_\_

General \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City/St/Zip \_\_\_\_\_

Subcontractors

Mechanical \_\_\_\_\_ Phone \_\_\_\_\_

Electrician \_\_\_\_\_ Phone \_\_\_\_\_

Plumber \_\_\_\_\_ Phone \_\_\_\_\_

Type of Construction (check one box)  New  Alteration  Addition  Repair/Replace

Project Description (include dimensions) \_\_\_\_\_

Total Valuation of Project \$ \_\_\_\_\_  
(Excluding cost of land)

### Health Department Information

Will this contain a business or commercial kitchen?  No,  Yes - Describe \_\_\_\_\_

Total number of bedrooms added (if project is residential) \_\_\_\_\_ Will there be any new plumbing or changes to the existing plumbing?  No,  Yes - Describe \_\_\_\_\_

The proposed construction shall be properly marked or staked on the property at the time of this application. The undersigned applicant shall call for all inspections and be responsible for this project until final approval by Johnson County. The undersigned applicant also agrees to comply with all County ordinances, State and Federal laws regulating building construction and certifies under oath and penalties of perjury that the foregoing information is true and correct:

Applicant's Signature \_\_\_\_\_ Email \_\_\_\_\_

**To Be Completed by Staff:**

Zoning District \_\_\_\_\_ Lot pins located?  No  Yes Structure staked?  No  Yes

Will this project include an addition to or an alteration of conditioned space?  No  Yes – If yes it is mandatory that the applicant complete an Energy Code Compliance Form

**Approvals:**

City Approval – Oxford/Shueyville/ Swisher (where applicable) \_\_\_\_\_

Variance Approval Date \_\_\_\_\_ Raze Agreement Expiration Date \_\_\_\_\_

Setbacks \_\_\_\_\_ Plan Review \_\_\_\_\_ Health Department \_\_\_\_\_

*Johnson County grants this permit to proceed in accordance with the information shown on this application and after receipt of permit fee is acknowledged. This permit shall expire 24 months after the approval date below. All disturbed soils associated with this permit shall be contained on the building site or this permit may be revoked.*

**Permit Approved by Administrative Officer:** \_\_\_\_\_

Permit Fee Information	
Total Due	
Receipt Number	
Check Number	

- Credit Card
- Cash
- Check

**Valuation Calculations**

**NOTES**

**City of Shueyville, Iowa**

**General Home Description**

**Lot Size** \_\_\_\_\_

**Total Square Footage of Structure:**

Square Footage – upper level: \_\_\_\_\_

Square Footage – main level: \_\_\_\_\_

Square Footage – lower level: \_\_\_\_\_

**\*Please indicate finished or unfinished for each level**

Number of bedrooms: \_\_\_\_\_

Number of bathrooms: \_\_\_\_\_

Number of half bathrooms: \_\_\_\_\_

Number of fireplaces: \_\_\_\_\_

Number of car garages: \_\_\_\_\_

Number of porches/deck: \_\_\_\_\_

**Type of Heat** \_\_\_\_\_

**Air Conditioning** \_\_\_\_\_

**Structural Building Materials** \_\_\_\_\_

**Exterior Finish of Structure** \_\_\_\_\_

**City Clerk will fill this section out**

Permit Fee \$ \_\_\_\_\_

Emergency 911 sign \$ \_\_\_\_\_

Total Fees \$ \_\_\_\_\_

**City of Shueyville, Iowa**

**Sign-off by Homeowner's Association for New Residence in Development**

Subdivision: \_\_\_\_\_

Lot Number: \_\_\_\_\_

Address: \_\_\_\_\_

Owners: \_\_\_\_\_

Signature of Homeowner's Association President: \_\_\_\_\_

Date of signature: \_\_\_\_\_

**Developers Sign-off for Housing Design**

Signature of Developer approving house design: \_\_\_\_\_

Date of signature: \_\_\_\_\_

**\*Originals must be submitted to the City Clerk**