

CRAWFORD COUNTY ZONING

DUANE ZENK, ZONING ADMINISTRATOR

Fax: (712) 263-8668

P.O. Box 444 ~ Denison, IA 51442

Phone: (712) 263-3447

APPLICATION FOR CONSTRUCTION AND/OR OCCUPANCY COMPLIANCE CERTIFICATE

PLEASE RETURN APPLICATION WITH YOUR CHECK, FOR THE REQUIRED AMOUNT (SEE BACK) →

Applicant: _____ Date: _____

Address of new construction site if applicable: _____ Phone: _____

Parcel # _____

I hereby request:

- a Construction Compliance Certificate
 an Occupancy Compliance Certificate

To build, alter buildings or structures on the following described premises:

Location of new construction (Township/Section/Quarter) : _____

Lot of Tract Area: _____ Estimated Cost: _____

AG BUILDINGS must be setback 40' from the right of way/fenceline.

Construction within 200' of an intersection must be setback 100' from the center of the road.

*Front Yard: 40 feet minimum required Zoning District: _____

*Side Yard: 15 feet minimum required *Height Limitations: _____

*Rear Yard: 30 feet minimum required Signs: _____

Briefly describe addition construction: _____

Addition is: Size: ____ X ____ 1 or 2 Story ~ Number of rooms: ____

Basement: Yes or No **If yes** Size: ____ X ____ Number of rooms in basement: ____ Do you have any basement area finished: None: ____ or : amount of finished area in basement: ____ X ____

Heat: ____ **Central Air:** ____ **Plumbing** in addition: None: ____ Full Bathroom: ____ Shower Stall Bathroom: ____ Toilet Room: ____ Whirlpool Bathroom: ____ Other: _____

Kitchen area: None: ____ Dishwasher: ____ Blt-in Oven: ____ Range: ____ ~ **Fireplace** added: None: ____ Type _____

Bedrooms: None: ____ 1st Floor ____ 2nd Floor ____ Basement: ____

Other Information: _____

** See information on back for zoning districts other than A-1 Agricultural*

I certify that the above information is true and accurate and that the above construction and use will comply with the Crawford County Zoning Ordinance in all respects.

Signed _____
(applicant)