



TOWN OF BASIN

BUILDING PERMIT APPLICATION

209 SOUTH 4th STREET
PO BOX 599
BASIN, WYOMING 82410

TEL 307-568-3331
FAX 307-568-9352
www.thetownofbasin.com

DATE: _____

PERMIT NO: _____

JOB ADDRESS							
LOT NO:	BLK	TRACT			SEE ATTACHED DEED		
OWNER:							
MAILING ADDRESS							
POINT OF CONTACT						Phone #	
BUILDING	FRONT	SIDE	SIDE	REAR	BUILDING	LENGTH	WIDTH
SET BACKS				DIMENSIONS			
BASEMENT	YES	FOUNDATION:		CONCRETE	ROOF: Comp		
	NO			BLOCK	Builtup		
CLASS OF WORK	<input type="checkbox"/> NEW	<input type="checkbox"/> ADDITION	<input type="checkbox"/> DEMOLITION	<input type="checkbox"/> REPAIR	<input type="checkbox"/> MOVE	<input type="checkbox"/> FENCE	
USE OF BUILDING							
Describe work: (attaché plans)							
Valuation of work \$							
REMARKS AND SPECIAL CONDITIONS							

AGREEMENT

This permit becomes null and void if work or construction authorized is not commenced within 120 days, or if construction or work is suspended or abandoned for a period of 365 days at any time after work is commenced.

The undersigned hereby agrees that the proposed work shall be done in accordance with the plans and specifications and statement herewith submitted and in conformity with the provisions of the town ordinances pertaining to the erection of buildings in the Town of Basin, Wyoming. Demolition work to be completed in 30 days unless otherwise noted under remarks.

PLANS CHECK BY: _____ PERMIT FEE: \$ _____

APPLICANT

DATE

BUILDING OFFICIAL

DATE