



CITY OF KEMMERER BUILDING PERMIT

220 Wyoming Highway 233
Kemmerer, WY 83101
Phone (City Hall) 307-828-2350 Ext. 101

PERMIT #

This permit becomes valid upon required approvals and acceptance of required fees

Property Address	_____		
Applicant	_____ Phone _____	_____ Fax _____	_____
Applicant Address	_____ City/State _____	_____ Zip _____	_____
Property Owner	_____ Phone _____	_____ Fax _____	_____
Owner's Address	_____ City/State _____	_____ Zip _____	_____
Contact	_____ Phone _____	_____ E-mail Address _____	_____

CHECK ONE

LICENSED CONTRACTOR DECLARATION:

I hereby affirm that all work will be performed by contractors licensed under the Wyoming Trades Certification whose licenses are in full force and effect. If contractors have not been selected at the time of the application for this permit, the permit shall be issued only on the condition that currently licensed contractors shall be selected by the applicant. The applicant shall provide the names and license numbers of the contractors to the City of Kemmerer and shall enter the same names and number on the permit before they begin their work.

OWNER-BUILDER DECLARATION

I hereby claim exemption from The requirement for licensing under the Wyoming Trades Certification because work will be performed by the owner of the property for his/her private non-commercial, non-public use. Any work not performed by the owner will be performed by a contractor licensed under the Wyoming State Certification Program. The names and license numbers of the contractors shall be provided to the City of Kemmerer and entered on the permit before their work has begun

I hereby certify that I have read and examined this permit and that the information provided by me is true and correct. All provisions of law and ordinances governing this type of work will be complied with whether specified herein or not. the granting of a permit does not presume to give authority to violate or cancel the provisions of any other state of local law regulating construction of the performance of construction.

APPLICANT SIGNATURE _____ DATE _____

This permit shall become null and void if work is not commenced within 180 days, of it work is suspected or abandoned for a period of 180 days or more at any time after the work has commenced. Commencement or continuation of work shall be verified only by inspection reports from City of Kemmerer inspectors. All required inspections shall be requested at least two working days before they are to be made. Inspections are required before any work is covered. Please call if you need further information about when an inspection is required.

	Office Use Only																											
<table border="0" style="width: 100%;"> <tr> <td style="width: 30%;">Name</td> <td style="width: 30%;">State license# (if applicable)</td> <td style="width: 40%;">Phone #</td> </tr> <tr> <td>General Contractor</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Electrical Contractor</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Mechanical Contractor</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Plumbing Contractor</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Engineer</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Architect</td> <td>_____</td> <td>_____</td> </tr> </table>	Name	State license# (if applicable)	Phone #	General Contractor	_____	_____	Electrical Contractor	_____	_____	Mechanical Contractor	_____	_____	Plumbing Contractor	_____	_____	Engineer	_____	_____	Architect	_____	_____	<table border="0" style="width: 100%;"> <tr> <td>Valuation</td> <td>_____</td> </tr> <tr> <td>Construction Type</td> <td>_____</td> </tr> <tr> <td>Occupant Load</td> <td>_____</td> </tr> </table>	Valuation	_____	Construction Type	_____	Occupant Load	_____
Name	State license# (if applicable)	Phone #																										
General Contractor	_____	_____																										
Electrical Contractor	_____	_____																										
Mechanical Contractor	_____	_____																										
Plumbing Contractor	_____	_____																										
Engineer	_____	_____																										
Architect	_____	_____																										
Valuation	_____																											
Construction Type	_____																											
Occupant Load	_____																											
Description of Work: _____ _____	FEES																											
<input type="checkbox"/> The city only reviews zoning ordinances and setbacks. Applicants are responsible for verifying property ownership, utilities & easements. <input type="checkbox"/> Before new home construction begins contact the Joint Powers Board for water and sewer requirements	<table border="0" style="width: 100%;"> <tr> <td>Building</td> <td>_____</td> </tr> <tr> <td>Plan Check</td> <td>_____</td> </tr> <tr> <td>Electrical</td> <td>_____</td> </tr> <tr> <td>Mechanical</td> <td>_____</td> </tr> <tr> <td>Plumbing</td> <td>_____</td> </tr> <tr> <td>Demolition</td> <td>_____</td> </tr> <tr> <td>Total</td> <td>_____</td> </tr> </table>	Building	_____	Plan Check	_____	Electrical	_____	Mechanical	_____	Plumbing	_____	Demolition	_____	Total	_____													
Building	_____																											
Plan Check	_____																											
Electrical	_____																											
Mechanical	_____																											
Plumbing	_____																											
Demolition	_____																											
Total	_____																											
<table border="0" style="width: 100%;"> <tr> <td>Plan Review OK'd _____</td> <td>Date _____</td> </tr> <tr> <td>Permit Approved _____</td> <td>Date _____</td> </tr> </table>	Plan Review OK'd _____	Date _____	Permit Approved _____	Date _____	<table border="0" style="width: 100%;"> <tr> <td>PREPAID PC</td> <td>_____</td> <td>Rec'd By: _____</td> </tr> <tr> <td>Date _____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>TOTAL</td> <td>_____</td> <td>Rec'd By: _____</td> </tr> <tr> <td>Date _____</td> <td>_____</td> <td>_____</td> </tr> </table>	PREPAID PC	_____	Rec'd By: _____	Date _____	_____	_____	TOTAL	_____	Rec'd By: _____	Date _____	_____	_____											
Plan Review OK'd _____	Date _____																											
Permit Approved _____	Date _____																											
PREPAID PC	_____	Rec'd By: _____																										
Date _____	_____	_____																										
TOTAL	_____	Rec'd By: _____																										
Date _____	_____	_____																										