



# Building Permit Application

City of Johnston

Community Development / Building Department  
 PO Box 410 • 6221 Merle Hay Road • Johnston, Iowa 50131

Phone: 515-727-7778 • Fax: 515-278-2033 • buildingdepartment@cityofjohnston.com

**Project Address:** \_\_\_\_\_

Legal Description / Lot / Subdivision \_\_\_\_\_

Building Setbacks (Proposed from lot lines): Front \_\_\_\_\_ Rear \_\_\_\_\_ Right Side \_\_\_\_\_ Left Side \_\_\_\_\_

**Applicant is the:**  Property Owner  Contractor  Architect  Engineer  Other (Describe) \_\_\_\_\_

**Applicant** \_\_\_\_\_

**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**E-mail** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**Project Description** \_\_\_\_\_

**Building Type**

Single Family Detached  Duplex/Bi-Attached  Townhome / Multifamily - # of Dwelling Units \_\_\_\_\_  Commercial Building

**Project Type**

Accessory Structure  Addition  Basement Finish  Deck / Pergola

Fence  Pool / Hot Tub  Remodel / Repairs  New Residential

New Commercial Building  Commercial Tenant Improvement Contract Value (Commercial Only) \_\_\_\_\_

Water Service Size (Commercial Only) \_\_\_\_\_ Water Meter Size (Commercial Only) \_\_\_\_\_

Residential water meters will be 5/8" unless otherwise approved.

**Attachments Included**

Site Plans  Building / Construction Plans  Outside Engineering Documentation

Energy Documents (REM/rate-RESCheck)  Grading Permit Application  Water Service Application

DNR Lot Transfer Document  SWPPP (2 copies, if required)

**NOTICE**

Separate permits and fees are required for Electrical, HVAC/Mechanical, and Plumbing work, State Issued Licensing may be required. Work described in this application must begin within 180 days from the date of issuance of the permit, efforts or work must be continuous until completed and a Certificate of Occupancy or Letter of Zoning Approval is issued, and must be completed as described herein unless amended by the Building Official. All work is subject to inspection and approval by the Johnston Building Department or designee. It is the responsibility of the permittee to seek all inspections and approvals.

It is the permittees responsibility to be familiar with the applicable provisions of the Johnston Code of Ordinances governing work covered by this permit application. The undersigned warrants that he/she has reviewed the necessary ordinances, specifications, provisions, zoning requirements, building, and fire codes applicable to the work described in this application for permit and will defend, indemnify, protect, and hold harmless the City of Johnston, its employees and contactors from any and all liability, from any claim, cause, or action which a person may have or claim to have by reason of any actual or alleged failure on the part of the undersigned to comply with the terms and conditions thereof.

I hereby certify that I have read and examined this application and its attachments and know the same to be complete, accurate, true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. I agree to adhere to the plans as submitted and approved by City Staff and will provide notification of any change prior to construction. The granting of a permit does not presume to give authority to violate or cancel any provision of any state or local law regulating construction or the performance of construction.

**Signature of Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_

**PLEASE ALLOW A MINIMUM OF 5 WORKING DAYS FOR PERMIT REVIEW**

**OFFICE USE ONLY**

**Date Completed:** \_\_\_\_\_ **Total Permit Fees \$** \_\_\_\_\_ **Permit No.** \_\_\_\_\_

**Approved By:** \_\_\_\_\_ / \_\_\_\_\_ **Failed** \_\_\_\_\_

**Comments** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**MPE Req.** \_\_\_\_\_  
**Add. Elev. Req.** \_\_\_\_\_



## CITY OF JOHNSTON

### NEW HOUSE BUILDING PERMIT CHECKLIST

2015 International Codes Effective July 1, 2017 with Local Amendments

**1. Building permit completed with the following:**

- a. Date of Application: Date applicant gives it to the City.
- b. Contractor: Name of who is doing the work.
- c. Project Street Address
- d. Subdivision and Lot Number
- e. Type of Project
- c. Description of Work, including:
  - (1) Type of structure - Single Family Dwelling, Single Family Townhouse, 6 plex, Multi-Family Dwelling 16 units, etc.
  - (2) Basement – note if there is no basement, if basement is unfinished, or if basement is finished.
  - (3) If basement is finished, please include how many square feet are being finished.
- d. Signature of Owner or Authorized Agent (Contractor can sign as authorized agent).

**2) Please Note TWO Site Plans are Required**

**Site Plan 1 Requirements:**

- a. 8 ½" x 11" or 8 ½" X 14 paper size - **DO NOT USE EDGE OF PAPER** for Lot Lines.
- b. Show House, Deck(s), & Cantilever(s) with measurements of each side of structure.
- c. Show House, Deck(s), & Cantilever(s) measurements to lot lines (not to setbacks).
- d. Show Building Setback Lines.
- e. Show **ALL** easements (Utility, Overland flowage, Trails, etc.).
- f. Show location of finished driveway.
- g. If lot has a septic system, show location of septic with location of septic tank and laterals.

**Site Plan 2 Requirements:**

- a. Show house with proposed final grading with one (1) foot contour lines for whole lot.
- b. Show construction entrance and indicated if it is rock or not.
- c. Show arrows indicating direction of storm water flow on the lot.
- d. Show locations of **all erosion controls, concrete washouts, trash enclosures and staging areas** on the lot.
- e. Name & Phone # of person responsible for installing and monitoring erosion control.

**3) Required IDNR information must be submitted with permit application.** (Questions regarding this can be directed to Eric Rehm at 727-7779)

- a. Grading Permit Application ( 2 pages).
- b. Written evidence of lot transfer and/or **2 unbound copies** of a prepared separate SWPPP as required by the transfer document.

**4) Building Contractor Application for Water Service.** Two signatures are required on this form.

**5) One set of building drawings.** Include stair section, wall section, and shear wall details.

**6) Lots not served by septic system must include a copy of an Approved Septic Permit Issued by Polk County**

**7) Building Permits do not include Electrical, Mechanical, or Plumbing permits.**

**8) Additional permits and fees will be required for lots served by low-pressure sanitary sewer system.**

**NOTE: State Energy Compliance documentation from a third party will be needed prior to the issuance of a Certificate of Occupancy**

Please contact the Building Department at 727-7778 with any questions.

# **BUILDING CONTRACTOR APPLICATION FOR WATER SERVICE**

## **CITY OF JOHNSTON, IOWA**

\_\_\_\_\_  
**Name of Builder or Contractor**

\_\_\_\_\_  
**Service Address**

**I HEREBY MAKE APPLICATION** for Water Service and agree to pay the Office of the Water Department as provided in the rules and regulations of the said City of Johnston, all bills rendered for water consumed upon these premises as registered upon any meter(s) installed for that purpose.

**I FURTHER AGREE** that the Meter inspector shall have access to the water meter(s) at all times, as provided by law and that my water service may be disconnected when I am delinquent in the payment of bills as provided in the rules and regulations of the Water Department. **PLEASE NOTE: ADDITIONAL PENALTIES WILL BE APPLIED TO BILLS THAT ARE IN ARREARS BEFORE SHUT OFF DATE.**

**LET IT BE KNOWN TO YOU AND YOUR PLUMBER THAT THE USE OF A JUMPER TO OBTAIN WATER IS ILLEGAL AND YOU AND THE PLUMBER WILL BE FINED AND CHARGED WITH AN ESTIMATED WATER USAGE. JUMPERS ARE ONLY ALLOWED TO TEST THE LINES THEN MUST BE REMOVED IMMEDIATELY.**

### **NOTICE OF SETTLING TRENCHES**

Water may not be used to settle trenches or foundation, back fill prior to the water meter being installed. Wasting of water may require the City to obtain additional permit fees. **(COMPLIANCE WITH ALL CITY REGULATIONS AND ESTABLISHED POLICIES SHALL BE OBSERVED AT ALL TIMES.)**

**SPECIAL NOTE:** I UNDERSTAND BY SIGNING IN THIS BOX THAT I WILL BE RESPONSIBLE FOR METERED WATER UNTIL SUCH TIME AS:

- (1) THE FINAL INSPECTION HAS BEEN DONE,
- (2) AN APPROVED FULL OR TEMPORARY CERTIFICATE OF OCCUPANCY HAS BEEN ISSUED,
- (3) THE NEW PROPERTY OWNER HAS MADE WRITTEN APPLICATION, AND
- (4) A FINAL READING HAS BEEN COMPLETED BY THE CITY FOR WATER SERVICE.

\_\_\_\_\_  
*Signature*

Signature here of the Builder, Contractor,  
or owner indicates they have read &  
understand these four requirements.

**Date:** \_\_\_\_\_ **Signed:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

\_\_\_\_\_

**Home Address:** \_\_\_\_\_

**Work Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

### **IRRIGATION METERS**

The watering of sod is never allowed without a water meter. You may apply to have an irrigation meter. Applications are available at the Johnston Water Department. They need to be approved by the City prior to any work being done by a licensed plumber or sprinkler installation company. You will need to purchase your irrigation meter from the City. Irrigation meters need to be set up as a separate meter and deduct meters are never allowed. If you have questions, call Johnston City Hall at **278-2344** or our Water Department directly at **727-7772**.



**Building Department**  
**Notification Statement and**  
**Grading Permit Application**  
 City of Johnston, Iowa

Date Submitted:	_____
Date Approved:	_____
Receipt#	_____
Permit#	_____

Reference Chapter 145, Erosion and Sediment Control and Stormwater Management

**Notification.**

- A. The applicant shall notify the City in writing a minimum of 5 working days prior to any application to the IowaDNR for release of any property from a General Permit #2 pursuant to 567 IAC 64.6(b), or any similar successor provision.
- B. The Holder of the State NPDES General Permit #2 can transfer State NPDES General Permit #2 responsibility to new property owners. Transferees must agree to the transfer in writing, and must agree to fulfill all obligations of the SWPPP, and the State NPDES General Permit #2. Absent such written confirmation of transfer of obligations, the applicant remains responsible for compliance on any lot that has been sold. *Reference: Iowa Administrative Code, Section 567, Chapter 64.6, paragraph 6.*
- C. The applicant shall be required to provide the following executed certification:

Address of the Property: \_\_\_\_\_

Print Name (**applicant**): \_\_\_\_\_

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

City, State, Zip \_\_\_\_\_

Telephone: \_\_\_\_\_

Print Name (**owner – if different from applicant**): \_\_\_\_\_

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

City, State, Zip \_\_\_\_\_

Telephone: \_\_\_\_\_

**Description of work (type and extent) to be performed:**

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**Estimated dates work is proposed: Start and Completion**

**IDENTIFY (WITH THE INITIALS OF YOUR NAME) ALL OF THE FOLLOWING THAT APPLY:**

\_\_\_\_\_ (1) "A State NPDES General Permit #2 **is not** required for this site."

\_\_\_\_\_ (2) "A State NPDES General Permit #2 **is** required for this site." The State NPDES General Permit #2 authorization number for this current permit is:

Permit# \_\_\_\_\_ Issue Date: \_\_\_\_\_

\_\_\_\_\_ a) "As owner, I have **not accepted** a transfer of liability."

\_\_\_\_\_ b) "As owner, I **have accepted** a transfer of liability for stormwater compliance, under the requirements of NPDES General Permit #2. Written evidence of this transfer will be provided to the City as part of this application."

\_\_\_\_\_ (3) "The Stormwater Pollution Prevention Plan (SWPPP) which includes this property is the SWPPP related to this authorization number and **has not been prepared separately;**" or

\_\_\_\_\_ (4) "The SWPPP for this property **has been prepared separately**, and a current copy will be provided to the City as part of this application. In addition, written evidence of continued compliance with the requirements of NPDES General Permit #2, including but not limited to SWPPP updates and weekly inspection logs shall be provided to the City."

Signature of Applicant:	Signature of Owner, <u>required</u> if different from Applicant:
Print Name of Applicant:	Print Name of Owner:
Date:	Date:

**CONTRACTOR INFORMATION - EROSION AND SEDIMENT CONTROL: All person(s) who will be accomplishing work under this permit (attach additional pages if necessary):**

1. Name: \_\_\_\_\_ Phone # \_\_\_\_\_

**EXCAVATION AND GRADING:**

2. Name: \_\_\_\_\_ Phone # \_\_\_\_\_

**OTHERS:**

3. Name: \_\_\_\_\_ Phone # \_\_\_\_\_

4. SOILS SURVEY Submitted (yes/no): \_\_\_\_\_ Certified by: \_\_\_\_\_

**Note: Written documentation of topsoil placement prior to final stabilization must be provided to the City and in compliance with Iowa DNR General Permit no. 2.**

**CITY STAFF USE:**

Date: \_\_\_\_\_ Approved by: \_\_\_\_\_

**Note: The term of a Grading Permit is 365 days from date of issuance, except as noted in Section 145.10 Grading Permit Term.**