

Accessory Structure Permit Application

You can now email your application, plans, and supporting documents to chambleega.gov for submittal.

Job Address:		City:	State:	Zip:		
Scope of work (provide a digital copy of site and construction plans):						
Property/Building Owner (of Job Address):			General Contractor Co. (If homeowner, provide declaration form):			
Address:			Address:			
City:	State:	Zip:	City:	State	: <u>Ž</u>	Zip:
Tel #:	Mobile #:		Tel #:	Tel #: Mobile #:		
E-Mail:	E-Mail:					
<u>'</u>						
Contractor's Business License #: State License #:						
Qualifications Held: ☐ Residential Basic Contractor ☐ Residential Light Commercial ☐ General Contractor ☐ Specialty Trade						
Check Applicable Type: □ Residential □ Non-Residential □ New □ Replacement						
Estimated Cost of Construction	on:	Sub	-contracted worl	c for this job: \square Elec	tric 🗆 Plur	mbing HVAC
☐ Shed Size: _		_ Height:	_ Construction I	Materials:		
Distance to property lines:						
☐ Greenhouse Size:		_ Height:	_ Construction I	Materials:		
Distance to property lines:						
Pool/Spa Length: Width: Construction Materials:						
Distance to property lines: Height: Construction Materials:						
			_ Construction N	Materials:		_
Distance to property lines:						
Garage/Carport Size: Height:			Construction M	laterials:		
Distance to property lines:						
□ Other (i.e., Tents, Booths, etc.)						
Notice: I hereby certify that I have read and examined this application and the information provided is true and correct. I further certify that all construction will comply with the current City and State Building Codes. I further agree that I shall be responsible from the date of this permit, or from the time of the beginning of the first work, whichever shall be earlier, for all injury or damage of any kind resulting from this work, whether from basic services or additional services, to person or property. I agree to exonerate, indemnify and save harmless the city from and against all claims or actions, and all expenses incidental to the defense of any such claims, litigation and actions, based upon or arising out of damage or injury (including death) to persons or property caused by or sustained in connection with any work performed under the building permit issued as a result of this application. This permit is void if no construction activity commences within six months of issuance date.						
Note: Only the Property Owner, Architect or General Contractor should sign this application as Applicant.						
		Date:				
Signature of Property Owner:			Date:			