



COMMUNITY DEVELOPMENT DEPARTMENT

220 East Morris Avenue, Suite 200

South Salt Lake City, Utah 84115

(801) 483-6063 telephone

(801) 483-6060 fax

www.sslc.com

BUILDING PERMIT APPLICATION

CHECKLIST PRIOR TO SUBMITTAL

1. Complete Application
2. Nonrefundable fees
3. TWO paper copies of plans (24" x 36")
4. ONE digital copy of plans on CD ONLY (*emails and flash drives not accepted*)
5. Location must have a current business license or pending application with SSL

**** INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED ****

PLAN RE-SUBMITTAL

1. Copy of plan review(s) sent by Planning, Building, Engineering, Fire
2. Response letter stating where corrections were made to plans
3. TWO paper copies of plans (24" x 36") (*Complete plan – No Single Pages*)
4. ONE digital copy of updated complete plans on CD ONLY

Submitting a building permit application does not authorize the applicant to begin construction. Working without an approved permit violates South Salt Lake Municipal Code. South Salt Lake City reserves the right to pursue enforcement action including but not limited to Notice of Violation and Summons, and Citations.

Applicants are responsible for addressing and correcting all inaccurate or incomplete application documentation. Inactive applications automatically void after 180 days. All voided applications require submittal of new applications, including payment of all costs and fees. All application fees are nonrefundable.



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BUILDING PERMIT APPLICATION

PERMIT NO. _____

APPLICATION DATE: _____

PROPERTY ADDRESS: _____

FEE TITLE OWNER(S):

MAILING ADDRESS: _____ **STATE:** _____ **ZIP:** _____
PHONE: _____ **EMAIL:** _____

**** AFFIDAVIT REQUIRED FOR ALL PERMIT APPLICATIONS (SEE ATTACHED) ****

BUSINESS INFORMATION

BUSINESS NAME: _____
ADDRESS: _____ **STATE:** _____ **ZIP:** _____
SSLC BUSINESS LICENSE NUMBER: _____ **PHONE:** _____ **EMAIL:** _____

PRIMARY CONTACT:

NAME: _____
PHONE: _____ **EMAIL:** _____

ARCHITECT:

NAME: _____
PHONE: _____ **EMAIL:** _____

GENERAL CONTRACTOR:

NAME: _____
STATE LICENSE NUMBER: _____ **EXPIRATION DATE:** _____
PHONE: _____ **EMAIL:** _____

ELECTRICAL CONTRACTOR:

NAME: _____
STATE LICENSE NUMBER: _____ **EXPIRATION DATE:** _____
PHONE: _____ **EMAIL:** _____

MECHANICAL CONTRACTOR:

NAME: _____
STATE LICENSE NUMBER: _____ **EXPIRATION DATE:** _____
PHONE: _____ **EMAIL:** _____

PLUMBING CONTRACTOR:

NAME: _____
STATE LICENSE NUMBER: _____ **EXPIRATION DATE:** _____
PHONE: _____ **EMAIL:** _____

DESCRIPTION OF WORK:

RESIDENTIAL **COMMERCIAL**

VALUATION OF PROJECT:

(NOT NEW CONSTRUCTION – INCLUDES LABOR AND MATERIALS)

NEW CONSTRUCTION VALUATION:

RESIDENTIAL

OCCUPANCY GROUP: _____ TYPE OF CONSTRUCTION: _____
FINISHED SQ. FT.: _____
UNFINISHED SQ. FT.: _____
GARAGE SQ. FT.: _____

COMMERICAL

OCCUPANCY TYPE: _____ CONSTRUCTION TYPE: _____
SQUARE FOOTAGE.: _____

OCCUPANCY TYPE: _____ CONSTRUCTION TYPE: _____
SQUARE FOOTAGE.: _____

OCCUPANCY TYPE: _____ CONSTRUCTION TYPE: _____
SQUARE FOOTAGE.: _____

FIRE SPRINKLERS:

____ YES TYPE: _____ NFPA13 _____ 13R _____ 13D

____ NO

MAXIMUM OCCUPANT LOAD: _____

ACKNOWLEDGEMENT OF RESPONSIBILITY

This is to certify that I am making an application for the described action by the City and that I am responsible for complying with all City requirements with regard to this request. This application should be processed in my name, and I am the party with whom the City should communicate regarding any matter pertaining to this application.

The documents and/or information I have submitted are true and correct to the best of my knowledge. I understand that my application is not deemed complete until all application requirements have been met, including the payment of any applicable fees, deposits, and/or bonds.

SIGNATURE OF APPLICANT: _____

NAME OF APPLICANT (PRINTED): _____

MAILING ADDRESS: _____

PHONE #: _____ EMAIL: _____

-----FOR CITY USE ONLY-----

Total Fees Due: _____

Building: _____

Plan Check: _____ Receipt #: _____

State Fee: _____

Water Impact: _____

Sewer Impact: _____

Parks Impact: _____

Final Receipt #: _____ Date Paid: _____

PROPERTY OWNER'S AFFIDAVIT

I/we _____, being duly sworn, depose and say that I/we am/are the current owner of the property involved in this application: that I/we have read the application and attached plans and other exhibits and are familiar with its contents; and that said contents are in all respects true and correct based upon my personal knowledge.

Owner's Signature

Owner's Signature (co-owner if applicable)

Subscribed and sworn to before me this _____ day of _____ 20 _____.

Notary Public
Residing in Salt Lake County, Utah
My commission expires: _____

AGENT AUTHORIZATION

I/we, _____, the owner(s) of the real property located at _____, South Salt Lake City, Utah, do hereby appoint _____ as my/our agent to represent me/us with regard to this application affecting the above described real property located in the city of South Salt Lake, and authorize _____ to appear on my/our behalf before any City Board or Commission considering this application.

Owner's Signature

Owner's Signature (co-owner if applicable)

On the ____ day of _____, 20 _____, personally appeared before me _____ the signers(s) of the above Agent Authorization who duly acknowledged to me that they executed the same.

Notary Public
Residing in Salt Lake County, Utah
My Commission expires: _____