



BUILDING / SANITATION PERMIT APPLICATION

LAND MANAGEMENT DIVISION 125 E. 8TH AVE., EUGENE, OR 97401

Please complete all lines inside white boxes.
(Incomplete requests will be rejected.)

Owner of Property _____ Phone _____

Owner Address _____ Zip _____

Your Name (The person signing this form) _____ Phone _____

Your Address _____ Zip _____

Contractor/Installer/Builder Name _____ CCB License # _____ Phone _____

Please indicate all other structures that now exist on the property:

- _____ None
- _____ House/Mobile Home
- _____ Garage/Shed/Storage
- _____ Barn
- _____ Industrial Building(s)
- _____ Commercial Bldg
- _____ Religious Building
- _____ Public Building
- _____ Other, please describe: _____

Please describe if/how water and sanitary services will be provided.

WATER

_____ none / not applicable
_____ well _____ water district*

District Name: _____
*Proof of service may be required prior to building permit issuance.

SEPTIC INSTALLED

_____ Yes BP/SP# _____
_____ No SI# _____

Proposed work and use: _____

Valuation of proposed work:

MAP/PARCEL NUMBER:

(Found on tax maps in the Assessment & Taxation Dept.)

Township _____ Range _____ Section _____ ¼ Section _____ Taxlot _____

Applications made w/in the last 30 days: _____

Planning fees will be determined on the content of this line.

Mail Permit To:

Name _____

Address _____

City/State _____ Zip _____

Site Address:

For Mobile Home Placement Only:

Brand: _____ Year: _____

Size (W&L): _____ No. of Bedrooms: _____

License # (No. always starts with X): X# _____

Distance in feet from MH to: Water: _____ Septic/Sewer: _____

Directions to site from nearest major intersection:

The signature authorizes the applicable programs to review this application and assess fees as determined by Lane Code. The signature also signifies that this does not mean that an application has been made until all Lane County programs and applicable state divisions have reviewed the submittal. The above information is also certified as true and accurate. I realize that false information submitted is grounds to deny the application.

I hereby certify that: 1) the foregoing statements and other information attached hereto are true and accurate to the best of my knowledge and belief; 2) I have the following legal interest in the property: ___owner of record, ___ contract purchaser, ___lessee, ___holder of exclusive option to purchase, ___duly authorized to act for a person who has the following legal interest: _____; and 3) the owner of record is knowledgeable of this application if I am not the owner.

LMD staff can NOT be held responsible for evaluations based on false, inaccurate or incomplete information.

X _____ Date: _____
Signature

Address: _____