

PALMER COMMUNITY DEVELOPMENT DEPT.
645 E. COPE INDUSTRIAL WAY, PALMER, AK 99645-6748
PHONE: 907-745-3709x1 FAX: 907-745-5443

FOR OFFICE USE ONLY

PERMIT # _____

DATE ISSUED _____

BUILDING CODE _____

FIRE & LIFE SAFETY PLAN REVIEW PERMIT APPLICATION

Construction Address		Legal Description (<i>Subdivision, Lot, Block</i>)	
Owner's Name & Mailing Address			
Phone #		Email Address	
Applicant's Name & Mailing Address			
Phone #		Cell Phone #	Contact Name
Email Address			Palmer Business License #
Description of Structure and Business(es)			

I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all information is true and correct to the best of my knowledge. I further certify that I have read, understand and will comply with all of the provisions outlined hereon. I also certify that the plot plan submitted is a complete and accurate plan showing any and all existing and proposed structures on the subject property. All contract work on this project will be done by a contractor holding valid licenses issued by the State of Alaska and the City of Palmer. **All businesses operating within city limits are required to have a city business license. Contact City Hall at 907-745-3271 for further information.**

OWNER'S SIGNATURE	DATE
SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT	DATE

PROVISIONS: The applicant is advised that issuance of this permit will not relieve responsibility of the owner or owner's agents to comply with the provisions of all laws and ordinances, including federal, state and local jurisdictions, which regulate construction and performance of construction, or with any private deed restrictions or requirements of the applicable fire service area.

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<p>Plan Review Fee* \$ _____</p> <p><i>*The fee is based on the estimated number of hours to complete in accordance with the currently adopted fee schedule.</i></p>		<p>Information/Documentation</p> <p>Req'd Rec'd</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Fire & Life Safety Plans</p> <p><input type="checkbox"/> <input type="checkbox"/> Alaska DEC Application</p> <p><input type="checkbox"/> <input type="checkbox"/> Alaska AMCO Application</p> <p><input type="checkbox"/> <input type="checkbox"/> Alaska DHSS Application</p>					
Zoning District	Front Yard	Rear Yard	Side Yard 1	Side Yard 2	Frontage	Bldg. Height	Lot Coverage %
Const. Type	Occupancy	Commercial Area	Residential Area	Garage Area	Misc. Area	Bdrms/Bathrms	# Stories
Plans Checked By:				Approved for Issuance By:			