

Check # _____

Cash _____

BUILDING PERMIT

0001

Tipton County, Tennessee

Owner's Name: _____ Phone #: _____

Mailing Address: _____

Building Location: _____

Tax Map #: _____ Group: _____ Parcel #: _____ Lot Area: _____

Permit Type:

- _____ New Construction
- _____ Addition
- _____ Remodeling
- _____ Mobile Home
- _____ Year Model
- _____ Size
- _____ Fill – Grading

Building Type:

- _____ Residential
- _____ Commercial
- _____ Industrial
- _____ Assembly
- _____ Storage
- _____ Other: _____

Zoning Classification:

- _____ FAR _____ C-1
- _____ R-1 _____ C-2
- _____ R-2 _____ C-3
- _____ R-3 _____ I-1
- _____ Flood Plain _____ I-2
- _____ Flood Elevation

Required: Front Yard Setback: _____, Side Yard Setback: _____, Rear Yard Setback: _____

Total Square Footage: _____ Contractor/Builder: _____

Estimated Cost: _____ License Number: _____

Remarks: _____

Payment Received From: _____ Amount: _____ For Permit #: _____

NOTE: THIS PERMIT BECOMES VOID IF WORK IS NOT STARTED WITHIN SIX (6) MONTHS FROM DATE OF ISSUE, OR IF WORK CEASES FOR ANY SIX (6) MONTH PERIOD FROM DATE OF ISSUE.

I do hereby certify that the above information is true and accurate. I fully understand that any misrepresentation of fact, intentional or unintentional of the above information shall constitute grounds for the revocation of this permit.

Owner

Tipton County Building Inspector

Date