SUBMITTAL PROCESS FOR BUILDING PERMITS

TIME FRAME:
Approximately twenty-one (21) days from initial application.

Applicant or representative will submit application to Leeds Town Staff for approval.

1. The Building Permit Application Packet is available at Town Hall and Town website. A filling fee for the building permit application is $100.00

2. Complete the packets per instructions and deliver to Town Staff at Leeds Town Hall.

3. Applicant will be scheduled with Town Staff for a Preliminary Building Plan Review. Town Staff will review the information for compliance with Leeds Land Use Ordinances. [The Land Use Ordinance is available for download on the Town website: www.leadstown.org.]

4. Plan Examiner will review the building plans for compliance with all applicable codes. This process takes about five (5) to ten (10) business days.

5. After the examination is completed, Town Staff will contact the applicant to pick up one set of the building plans and pay all applicable fees.

Building Permit & Impact Fees:

a. Building Permit
   1. Building Permit Filing Fee $100.00
   2. Building Permit Fee Based on Valuation
   3. Building Permit Extension Fee 1% of evaluation of home

b. Excavation Permit
   Based on Volume of earth moved

c. Excavation Plan Review
   Based on Volume of earth moved

d. Impact Fees
   1. Park Impact Fee $1,300.00
   2. Road Impact Fee $3,295.00
Please review ALL information provided in this packet prior to submitting your Building Permit Application and packet sets. It is your responsibility to provide all information as required. Fees for copies not included as required below will be included and charged back to applicant. Please retain a copy of all documents for your records.

1. PROVIDE TWO (2) FULL SIZE SETS OF BUILDING AND SITE PLANS. Building and site plans must include plot indicating property location, site address, building, and sanitation layouts.

2. PROVIDE PACKET INCLUDING EACH OF THE FOLLOWING:
   a. Size 24” x 30” or larger of the building and site plans including plot indicating property location, site address, building and sanitation layouts. These must have all the same information provided in the full size set of site plans in I. above.
   b. Copies of the completed Bldg. Permit Application. Complete all blocks above the ‘Building Inspector/Office Use Only’ line. Include the cost of construction of work - this includes the costs associated with building the structure including material time and labor. It does not include the price of the land. The Building Inspector must authorize this cost prior to issuance of the building permit license.
   c. Proof of the Percolation Test and Septic Permit. Percolation test must be completed by an Environmental Scientist and submitted to the Washington County Health Department for a septic permit. More than one lot (i.e.; Subdivision) must include a Letter of Feasibility from the Washington County Health Department. Contact Southwest Utah Public Health: 435-673-3528 to obtain your permit.
   d. Proof of Water Service from applicable water provider. Subdivisions must also include a Utah State Water Engineer’s Report.
   e. A copy of the current contractor license and business license.
   f. Subdivision CC&R’s, if applicable.
   g. Letter from Hurricane Valley Fire Special Service District to show compliance with current International Fire Code and receipt for Impact Fee. Contact (HVFSSD) at 435-635-9562

THE FOLLOWING FORMS ARE PROVIDED IN THIS PACKET AND ARE TO BE INCLUDED IN THE PACKETS (ABOVE):

2. Attachment 2. Give Gas Sizing Form to your Plumber if installing Natural Gas.
3. Attachment 3. If you are the Owner/Builder, complete the Owner/Builder Certification and Agreement. This form requires authorization by a Notary Public.
4. Attachment 4. Encroachment Permit Application. Complete at the time work is scheduled and submit to Town Hall. The application is included in this packet. Note all associated encroachment fees are in addition to Building Permit Application fees.
5. Attachment 5. Completed Building Permit Application Checklist.
TOWN OF LEEDS BUILDING PERMIT APPLICATION

PERMIT NO.

JOB ADDRESS:

LEGAL DESCRIPTION / SUBDIVISION:

OWNER NAME:

Mailing Address

Contact Phone

CONTRACTOR NAME:

Mailing Address

Contact Phone

ELECTRICAL CONTRACTOR:

Mailing Address

Contact Phone

PLUMBING CONTRACTOR:

Mailing Address

Contact Phone

CLASS OF WORK: New ☐ Mfrd ☐ Stick ☐ Garage ☐ Pool ☐ Repair ☐ Alteration ☐ Addition ☐ Move ☐ Remove ☐ Other ☐

USE OF BUILDING: Residential ☐ Storage ☐ Other, specify:

SETBACKS FROM PROPERTY LINE [FEET]: Front: Rear: Side: Side: # of Outbuildings: LOT SIZE:

COST OF CONSTRUCTION: $___

NOTICE TO CONTRACTOR, AUTHORIZED AGENT, OWNER/BUILDER: SPECIAL PERMITS MUST BE OBTAINED TO CUT UP STREETS IN MAKING SEWER & WATER CONNECTIONS, DRIVEWAYS, CURBS, ETC. THIS PERMIT BECOMES NULL & VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR 180 DAY PERIOD AT ANY TIME AFTER WORK IS COMMENCED. I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO违背OR CANCEL THE PROVISION OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.

SIGNATURE OF CONTRACTOR, AUTHORIZED AGENT or OWNER ONLY: OWNER/BUILDER

BUILDING INSPECTOR / OFFICE USE ONLY

<table>
<thead>
<tr>
<th>SQ. FOOTAGE:</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 1:</td>
<td>Outbld:</td>
<td>Group:</td>
<td>Division:</td>
</tr>
<tr>
<td>Level 2:</td>
<td>Basement:</td>
<td># of Dwelling Units:</td>
<td># of Stories:</td>
</tr>
<tr>
<td>Level 3:</td>
<td>Other:</td>
<td>Maximum</td>
<td>Occupation Load:</td>
</tr>
<tr>
<td>Garage:</td>
<td></td>
<td>Fire Sprinklers Required:</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☐</td>
<td></td>
</tr>
<tr>
<td>TOTAL SQ. FOOTAGE:</td>
<td></td>
<td>Off-Street Parking:</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Covered ☐ Uncovered ☐</td>
<td></td>
</tr>
<tr>
<td>TYPE OF CONSTRUCTION:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IMPACT FEES:</td>
<td>BLDG PERMIT FEE: $</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PARKS: $</td>
<td></td>
<td>SURCHARGE: $</td>
<td></td>
</tr>
<tr>
<td>SAFETY: $</td>
<td>(11% of Building Permit Fee) $</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. TOTAL BLDG: $___

2. TOTAL IMPACT: $___

APPLICATION APPROVED BY BUILDING INSPECTOR

Date

Total To: LASSD

2% (.002) of Cost of Construction $___

Total To: TOWN OF LEEDS

Application Payment Received by Clerk/Recorder or Treasurer

Date

*1% SURCHARGE - STATE DEPARTMENT OF COMMERCE, DIVISION OF OCCUPATIONAL AND PROFESSIONAL LICENSING

BUILDING PERMIT APPLICATION - TOWN OF LEEDS
LAND USE DEVELOPMENT

PERMIT APPLICATION

Attachment 1

Name of Owner/Builder ____________________________________________

Physical Address ________________________________________________

Mailing Address _________________________________________________

Home Phone __________ Business Phone __________ Cell Phone __________

LOCATION OF CONSTRUCTION SITE

Address ________________________________________________________

Subdivision Name ________________________________________________

Lot No. _______________ Tax ID Parcel No. _______________ Zoning _______________

__________________________________ ______________________________
Signature Date
GAS SIZING INSTALLATION PLAN APPLICATION

COMPLETE FORM IF INSTALLING NATURAL GAS

Attachment 2

Installer’s Company: __________________________________________
Business Phone: ___________________________ Cell Phone: __________
License # ___________________________ Permit #: __________________
Subdivision: ___________________________ Lot #: __________ Phase: __________
Project Address: __________________________________________
Date: __________ BTU/Cubic Feet: _______ Inspector: ______________
Fuel line sized for: 4 oz. Delivery Pressure _________ -OR- 2 lb. Delivery Pressure _________
Test Pressure: __________________________________________

For Inspection please contact Dennis Mertlich, Building Inspector at 435-635-9935

Total Length: ___________________________ Total C.F.H. ___________________________

Approved By: ___________________________ Building Inspector __________ Date __________
OWNER/BUILDER CERTIFICATION AND AGREEMENT
TO COMPLY WITH THE CONSTRUCTION TRADES LICENSING ACT
Attachment 3

Owner/Builder Name: ________________________________

Address, City, State, Zip: ________________________________

Contact Phone Number(s): ________________________________

Address of Construction Site: ________________________________

Subdivision Name: ___________________________ Lot No. _____________ Tax ID Parcel No. _____________

CERTIFICATION

I, ___________________________, certify under penalty of perjury that the following statements are true and correct and are based upon my understanding of the Utah Construction Trades Licensing Act:

1. I am the sole owner of the property and construction project at the above described location.

2. The improvements being placed on the property are intended to be used and will be used for my personal non-commercial, non-public use.

3. I understand that work performed on the project, if it is the type of work which is regulated under the Construction Trades License Act, and Rules of the Contractors Licensing Board, must be performed by the following:
   a. myself as the sole property owner; or
   b. a licensed contractor; or
   c. my employee(s) on whom I have worker's compensation insurance coverage, on whom required payroll taxes are withheld and with respect to whom I comply with all other applicable employee/employer laws; or
   d. any other person working under my supervision as owner/builder to whom no compensation is paid; and

4. I understand that if I retain the services of an unlicensed contractor or compensate an unlicensed person, other than as an employee for wages, to perform construction services for which licenser is required, I may be guilty of a Class A Misdemeanor and may be additionally subject to an administrative fine in the maximum of $2,000.00 for each day on which I violate the law.

Dated this ______ day of ___________, 20 ___.

Printed Name of Owner/Builder ________________________________

Signature of Owner/Builder ________________________________

Subscribed and sworn before me this ______ day of ___________, 20 ___ in the County of Washington, State of Utah.

Notary Public ________________________________
APPLICATION FOR RIGHT OF WAY ENCROACHMENT PERMIT

Work cannot begin until permit is granted

Attachment 4

Date: 

Application is hereby made by: 

Address: 

Explain project: 

Project Address/Location: 

Attach two copies of the plan for the encroachment work. If possible, new underground utility installation crossing a paved road should be placed by boring. In any case, show the extent to which the Town Right-of-Way will be disturbed by placing poles or underground lines. Include length, width and depth of trenches for underground lines; or vertical clearance and voltage of overhead lines.

Construction to begin on or about: and will be completed on or before: 

An application fee of $125.00 will be assessed to all work to defray costs of processing the application & inspecting any remedial work done.

A completion guarantee deposit fee of:

Pavement (including chip/seal) ...........$3,000.00 up to 70 sq. ft. ..................................sq.ft. = $ 

Pavement (including chip/seal) ...$45.00 per sq. ft. over 70 sq. ft. .................................. * 45 = $ 

Gravel Surface ..............................$6.00 per sq. ft. ............................................... * 6 = $ 

Unimproved Surface ..........................$3.00 per sq. ft. ............................................... * 3 = $ 

Totaling 

The portion not required to complete the work will be returned on final inspection by the Town Engineer. If this permit is granted, the applicant agrees to abide by all of the restrictions and regulations contained in the Leeds Right-of-Way Encroachment Ordinance. In addition, safe vehicle and pedestrian traffic conditions must be maintained, including following the guidelines of Part IV of the Manual on Uniform Traffic Control Devices (MUTCD).

NAME OF APPLICANT – OWNER OR CONTRACTOR

SIGNATURE

TITLE
BUILDING PERMIT APPLICATION CHECKLIST

Attachment 5

Use the following as a checklist for the packets you provide. If you do not have all information listed please complete the explanation block below.

___ Two sets of full size sets of building and site plans.
___ Percolation Test documentation from Health Department.
___ Proof of Septic Permit from Health Department.
___ Proof of water service from culinary water provider.
___ Proof Hurricane Valley Fire Special Service District requirements have been met.
___ Utah Department of Health sanitation requirements have been met.
___ Do you have irrigation water rights? If yes, how many shares? ________
___ The Uniform Construction Safety Standards have been met.
___ Plans and final development meet all current ordinances and zoning requirements of the Town of Leeds.
___ Plans for construction/development and use of property comply with the current Town of Leeds General Plan.

Explanation if any of the above requirements have not been met:

________________________________________________________________________
________________________________________________________________________

Date ____________ Signature(s) of Owner(s) of Property

PRINT NAME ___________________ SIGNATURE __________________缺点

PRINT NAME ___________________ SIGNATURE __________________缺点

PRINT NAME ___________________ SIGNATURE ________________缺点

Deliver all completed documents to Clerk/Recorder at Leeds Town Hall. At this time you will be scheduled to meet with a Planner for the Plan Review. Plan to allow a minimum of thirty (30) days prior to scheduling presentation with the Planning Commission IF APPLICABLE. Leeds Planning Commission Meetings are held the 1st Wednesday of each month unless otherwise noticed. Applicant or his representative must be present at the Planning Commission Meeting. Failure to appear will cause your request to be scratched from the agenda and it will be your responsibility to contact Town Hall to re-schedule.

NO BUILDING WILL BEGIN

Until approval from the Town Planner & Clerk is obtained, and all building fees are collected.
BUILDING and DEVELOPMENT REQUIREMENTS

Buildings and structures requiring a permit include, but are not limited to:

- Any structure which purpose shall be residential or commercial occupancy.
- Any structure exceeding 120 square feet in area.
- Any structure containing plumbing or electrical fixtures.
- Any structural modification to an existing building, including room additions or expansion.

The following are requirements from the International Building Code and are included in this packet for your information.

1. Complete signed and sealed (as required by applicable laws) architectural plans, structural plans, and material specifications of all work.

2. Site plans include the following information:
   a. Size and location of all new construction and all existing structures on the site.
   b. Distances from lot lines.
   c. Established street grades and proposed finish grades, if applicable.

3. Architectural Plans and specifications include:
   a. Description of uses and the proposed use group(s) for all portions of the building and the design approach for mixed uses, as applicable.
   b. Proposed type of construction of the building.
   c. Fully comply with Land Use Ordinance for starting point for all structures. This must be approved by the Planning Commission and an Architectural Committee if applicable to your property.
   d. Adequate details and dimensions to evaluate means of egress, including occupant loads for each floor, exit arrangement and sizes, corridors, doors, stairs, etc.
   e. Exit signs/means of egress lighting, including power supply.
   f. Accessibility scoping provisions.
   g. Adequate details to evaluate fire resistive construction requirements, including data substantiating required ratings.
   h. Details of plastic, insulation, and safety glazing installation.
   i. Details of required fire protection systems.

4. Structural plans, specifications, and engineering details to include:
   a. Soils report indicating the soil type and recommended allowable bearing pressure and foundation type.
   b. Signed and sealed structural design calculations which support the member sizes on the drawings.
   c. Local design load criteria, including (as applicable): frost depth; live loads; snow loads; wind loads; earthquake design data; other special loads.
   d. Details of foundations and superstructure.
   e. Provisions for required special inspections.
   f. Applicable construction standards and material specifications (i.e., masonry, concrete, wood, steel, etc.).
CONTACT NUMBERS

IMPORTANT! Keep this list for reference throughout construction completion.

Building Inspection: Dennis Mertlich, Building Inspector at 435-635-9935

Leeds Domestic Water Association (LDWA): 435-879-0278

Hurricane Valley Fire Special Service District: 435-635-9562

Questar Gas: 435-673-7514

Rocky Mtn. Power: 888-221-7070

Trash Collection: Leeds Town Hall 435-879-2447 to establish account

Century Link Phone Company: 877-290-5458

Upon completion of all building inspections, you will receive a Certificate of Occupancy (CO) from the Leeds Building Inspector.

You will need to contact Town Treasurer to begin Trash Service at that time.
TOWN OF LEEDS
288 NORTH MAIN STREET
P.O. BOX 403479
LEEDS, UT 84746-0379
PHONE: 435-879-2447 FAX: 435-879-6925
E-mail: clerk@leedstown.org // Website: www.leedstown.org

TRASH COLLECTION FORM

NEW ACCOUNT? YES ________ NO ________

If NO, please give previous name on account ____________________________________________

Termination date: ________________________________________________________________

New name on account: _____________________________________________________________

Date account opened: ____________________________________________________________

Physical address of Trash Collection: ______________________________________________

Mailing address: _________________________________________________________________

Contact phone: _________________________________________________________________

Number of cans requested: ________

Notes:

Would you like to be on the town email list to receive information on meetings, public notices, general information and reminders for the Town of Leeds? YES ________ NO ________

Email address: _________________________________________________________________