

CITY OF CASCADE, IOWA BUILDING PERMIT

Expiration of Permit – 12 Months

Iowa One Call Made 1-800-292-8989 or 811

Permit No. _____
Date: _____
County: _____
DBQ JONES
Granted: Denied:
Reason for Denial: _____

Zoning Administrator Signature

City Council Signature

Date: _____ Zoning: _____

Permit Fee: _____ Water & Sewer Fee: _____

Water/Sewer Connection Required: Y N

****Installation of a backflow prevent is required**

Date Paid: _____

Legal Description: _____

Parcel ID: _____

Setbacks:

Front: _____ Side: _____

Rear: _____ Height: _____

Applicant Name: _____ Phone: _____ Email: _____

Address of Project: _____ Cost: _____

Description of Project: _____

Contractor: _____ Address: _____

All requests for building permit need to have a drawing of the lot location and proposed and existing structures. The drawing should show the setbacks from the property lines and distances between structures.

Signature of Applicant: _____