City of Helena

PERMIT APPLICATION

City of Helena, Building Division
316 N. Park Ave. * Room 435 * Helena, MT 59623
Phone: (406)447-8437 or (406)447-8438

OFFICE USE ONLY: LOG #_____
Application #: _____
Date Issued: _____
Square Foot Value: _____
Permit Cost: _____

OFFICE USE ONLY:

Engineering ☐	Fire ☐	Utility ☐	Zoning/Site Landscaping ☐	Parks/Blvd. Landscaping ☐	WWTP ☐
Date Ap: _____	Date Ap: _____	Date Ap: _____	Date Ap: _____	Date Ap: _____	Date Ap: _____
By: _____	By: _____	By: _____	By: _____	By: _____	By: _____

Building Div.: Reviewer: _____ Review Start: _____ Review Start: _____ Review Start: _____
☐ Revise: _____ ☐ Revise: _____ ☐ Approved: _____ ☐ EsGil: _____

Date Submitted: _____ **Estimated Contract Value (Labor & Materials): $**_____

(Please print all information. All information **MUST** be completed.)

PROJECT INFORMATION		Project Address: _____ Business Name (DBA): _____ Project Description: _____ Legal Description: _____ Property Tax # / Geo Code: _____
OWNER	Notify *YES* *NO*	Name: _____ Phone #: _____ Address: _____ Fax #: _____ City, State, Zip: _____ Email: _____
GENERAL CONTRACTOR	Notify *YES* *NO*	Name: _____ Phone #: _____ Address: _____ Fax #: _____ City, State, Zip: _____ Email: _____
ARCHITECT / DESIGNER	Notify *YES* *NO*	Name: _____ Phone #: _____ Address: _____ Fax #: _____ City, State, Zip: _____ Email: _____
ENGINEER	Notify *YES* *NO*	Name: _____ Phone #: _____ Address: _____ Fax #: _____ City, State, Zip: _____ Email: _____
PLAN DATA		Occ. Group: _____ Type of Const.: _____ Roof Material: _____ Historic District: *Yes or No* Sprinkler System: *Yes or No* Fire Alarm System: *Yes or No* Flood Plain Zone: *Yes or No* Designation: _____
SUBMITTED DOCUMENTS		Site Plan: _____ Landscape Plan: _____ Architectural Plans: _____ Structural Plans: _____ Electrical Plans: _____ Mech/Plmg Plans: _____ Specifications: _____ Structural Calculations: _____ Energy Compliance Data: _____ Other: _____

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has or will commence prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in the City of Helena.

APPLICANT AFFIDAVIT: I certify that all the foregoing information is accurate. Signature below indicates acceptance of financial responsibility for plan check fees and postage expenses associated with plan review. **Plans will not be reviewed without signature.**

APPLICANT SIGNATURE: (circle one) **Owner** **General Contractor** **Architect/Designer** **Engineer**

_____ _____
Signature Print Name