

**COUNTY OF MORGAN
STATE OF WEST VIRGINIA**

IMPROVEMENT LOCATION PERMIT APPLICATION

DATE: _____ AMOUNT: _____ PERMIT#: _____

APPLICANT INFORMATION:

TYPE OF CONSTRUCTION:

NAME: _____

_____ Recreational/Vacation

ADDRESS: _____

Bath Rms: _____

Bedrooms: _____

Home Phone: _____

_____ Residential/Year Around

Work Phone: _____

Bath Rms: _____

Bedrooms: _____

MOBILE HOMES

_____ Mobile Home # Bath Rms: _____ # Bedrms: _____

_____ ONE Mobile Home on this Property ONLY

_____ MORE than ONE Mobile Home on this Property. How many? _____

NOTE: Only ONE Mobile Home is allowed on a lot unless approved by the Health Department and the Morgan County Planning Commission.

Building Permit Officer (Exemption): _____

I certify that there is only (1) One Mobile Home on this property unless otherwise noted by the Building Permit Officer.

SIGNATURE: _____

Tax District: _____

_____ Improvements/Additions: (Decks, Porches, Add-Ons, etc.)

Number of Acres or Lot Size _____

_____ Outbuildings: (Garages, Barns, Pole Barns, Sheds, etc.)

Location (Give Reference to Roads, Streams

_____ COMMERCIAL: Stores, Restaurants, Plants, etc.)

_____ COMMERCIAL IMPROVEMENTS

CONTRACTORS' NAME & ADDRESS:

Description of Work: _____

Dimensions: _____

Estimated Cost: _____

Completion Date: _____

To be completed by the Building Permit Officer:

Water Permit: _____

Sewer Permit: _____

Map# _____ Parcel# _____

Deed Bk# _____ Page# _____

***** Please complete drawing on the back of this page *****

FLOOD PLAIN AREAS

FLOOD PRONE ____ (If property is determined to be in the Flood Plain Zone, you will be provided with a list of additional information to be supplied by the Building Permit Officer.)

NOT FLOOD PRONE ____ I hereby CERTIFY that this structure will NOT be located in the Flood Plain Zone.

SIGNATURE: _____

By my signature below, I hereby declare any and all improvements are added on my **REAL ESTATE PROPERTY** or the designated property owner listed on this application. **NO EASEMENTS** or **RIGHT-OF-WAYS** are encroached upon by the improvements described within this application.

SIGNATURE: _____

DATE: _____

PLEASE MAKE A SKETCH IN THE BOX BELOW OF: The driveway entering your lot, location of your home, location of well and septic and any other buildings on your property.

If you are adding on to an existing building, please indicate which side it will be on with dotted lines .

I am aware of the Health Department approved septic location and that the location can not be moved without issuance of a new septic permit. I am also aware that the septic permit needs to be renewed on an annual basis to remain valid until the system is installed. Without renewal the permit will become "VOID" one year from the date of issue.

Property Owner or Authorized Agent

I understand that Morgan County does not enforce subdivision covenants and restrictions nor deed restricted properties. Permits approved by the Planning Commission do not nullify civil contracts.

Property Owner or Authorized Agent

If you are building a new home, PLEASE PROVIDE THE PLANNING COMMISSION WITH WRITTEN DIRECTIONS FROM THE COURTHOUSE TO YOUR CONSTRUCTION SITE on a separate sheet.