

APPLICATION FOR ZONING PERMIT  
(Building)

City of Eldora, Iowa

Applications for zoning permits must be approved prior to starting construction. Per Code Section 165.22

The undersigned owner of the property described herein requests permission to erect the improvements for the use and in the location and manner as set forth in detail below. The owner agrees that the improvements and the use of the property will be in accordance with the Ordinances of the City of Eldora and the laws of the State of Iowa which apply to the improvement and its use.

1. Accessory buildings shall be erected in side or rear yards only and shall be a distance of at least five feet (5') from rear lot lines and two feet (2') from side lot lines and shall not be taller than the height of the main building, but not to exceed eighteen feet (18') in height. On a corner lot they shall conform to the set back regulations on the side street. Code Section 165.07
2. Additions to house need to follow the guidelines established for the Zoning Area that your house is located in.

The owner subscribes to the statements herein as a basis for the issuance of the zoning permit.

Property Owner \_\_\_\_\_ Date \_\_\_\_\_  
(please print)

Applicant \_\_\_\_\_ Contractor \_\_\_\_\_

Address \_\_\_\_\_ Plumber \_\_\_\_\_

\_\_\_\_\_ Electrician \_\_\_\_\_

Telephone No. \_\_\_\_\_

\*\*\*\*\*

Location: Lot \_\_\_\_\_ Block \_\_\_\_\_ Addition \_\_\_\_\_

Zoning District \_\_\_\_\_ Address \_\_\_\_\_

\*\*\*\*\*

Proposed Improvement \_\_\_\_\_ Foundation Size \_\_\_\_\_

\_\_\_\_\_ Building Height \_\_\_\_\_

Proposed Use \_\_\_\_\_ No. of Rooms \_\_\_\_\_

Number of Families \_\_\_\_\_ Garage Size \_\_\_\_\_

Kind of Construction \_\_\_\_\_ Estimated Cost \_\_\_\_\_

Fronts on \_\_\_\_\_ (Street or Avenue)

Will the structure have water or sewer connections – yes or no

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Sketch: Please draw a bird's eye view of lot dimensions and the exact location of the proposed improvements on the lot with distances to the front, side and rear lot lines, also principle dimensions of the building or addition to be constructed. **Be sure to call ONE CALL 800-292-8989 48 hours before digging.**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Owner

Application approved/denied \_\_\_\_\_

\_\_\_\_\_  
Code Compliance

\_\_\_\_\_  
Water Department

\_\_\_\_\_  
City Hall

Permit shall expire unless construction has been commenced within 90 days. Completion time is 2 years from date of permit.

Permit Charge: \$30.00 minimum or \$5.00 per \$1000

# Board of Adjustment

Denial on:

Date:

I wish to appeal the decision of the Administrative Officials by requesting the Board of Adjustment to make a determination on this permit.

\_\_\_\_\_  
Property Owner

Application approved/denied on \_\_\_\_\_, 20\_\_\_\_ by

\_\_\_\_\_  
Board of Adjustment Chair

Appeal Cost: \$50.00

Notice in Paper: \_\_\_\_\_

Sent to Neighbors: \_\_\_\_\_

Meeting Date: \_\_\_\_\_