Town of Mills
704 4th Street
P.O. Box 789
Mills, Wyoming 82644
307-234-6679

Permit #:_____

BUILDING PERMIT APPLICATION

(INCOMPLETE APPLICATIONS CANNOT BE PROCESSED) – Zoning Certificate **MUST** accompany this form.

Applicant to complete numbered spaces only.

JOB ADDRESS

1 LEGAL DESCR.	LOT NO.	BLK	ADDITION (☐ See attached sheet)

2 OWNER | MAIL ADDRESS, CITY, STATE, ZIP | PHONE / CELL

3 CONTRACTOR | MAIL ADDRESS, CITY, STATE, ZIP | PHONE | LICENSE NO. / CELL

4 ARCHITECT OR ENGINEER | MAIL ADDRESS | PHONE | LICENSE NO.

5 USE OF BUILDING

6 Class of work: ☐ NEW ☐ ADDITION ☐ ALTERATION ☐ REPAIR ☐ REMODEL

7 Describe Work:

8 Valuation of work: $

SPECIAL CONDITIONS:

APPLICATION ACCEPTED BY	PLANS CHECKED BY	APPROVED FOR ISSUANCE BY

PLAN CHECK FEE	PERMIT FEE

Type of Const.	Occupancy Group	Division
Size of Bldg. (Total) Sq. Ft.	No. of Stories	Max. Occ. Load

Fire Sprinklers Required ☐ Yes ☐ No

No. of Dwelling Units

Special Approvals	Required	Received	Not Required
ZONING			
SOIL REPORT			
ENGINEERING			
FIRE			
OTHER (Specify)			

NOTICE

SEPARATE PERMITS ARE REQUIRED FOR ELECTRICAL, PLUMBING, HEATING, VENTILATING OR AIR CONDITIONING.

THIS PERMIT BECOMES NULL AND VOID IS WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS, OR IF CONSTRUCTION WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS 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 VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.

_____ _____
SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT DATE

_____ _____
SIGNATURE OF OWNER (IF OWNER BUILDER) DATE

WHEN PROPERLY VALIDATED (IN THIS SPACE) THIS IS YOUR PERMIT

PLAN CHECK VALIDATION CK. M.O. CASH PERMIT VALIDATION CK. M.O. CASH