



Mitchell County Planning & Zoning Department
212 South 5th Street
Osage, Iowa 50461
641-832-3943

Permit Approved:	☐
Permit Denied:	☐
Farm Exempt:	☐
Date Permit	
Approved or Denied:	

BUILDING PERMIT APPLICATION

Job Site Address: _____ **Parcel #:** _____

Owner(s): _____ **Contractor:** _____

Address: _____ **Address:** _____

City, State, Zip: _____ **City, State, Zip:** _____

Phone : _____ **Phone:** _____

Email: _____ **Email:** _____

DESCRIPTION OF WORK:

Proposed structure/project: _____

To be used as: _____

Anticipated Start Date: _____ Anticipated Completion Date: _____

DIMENSIONS OF PROPOSED STRUCTURE: *(Blueprints or drawing must be attached)*

Width _____ Depth _____ Area _____ Height to peak _____ Eave Height _____ Stories _____

DISTANCE/SETBACK TO PROPOSED STRUCTURE FROM: Site diagram including all existing and proposed improvements (buildings, paving, septic system location, entrance, streets, etc.) must be attached.

Front (from right-of-way line, not street) _____ **Rear** _____ **Side** _____ **Side** _____

Will there be any running water in the proposed structure? ☐ Yes ☐ No If so, _____ Public OR _____ Private

Will there be a new well drilled on the property? ☐ Yes ☐ No (Public Health Office for permit)

Is the property served by a _____ Public OR _____ Private Sanitary sewer? (Public Health Office for permit)

Will there be a new septic system installed on the property? ☐ Yes ☐ No (Public Health Office for permit)

Will there be a sign on the property (i.e., home business occupation)? ☐ Yes ☐ No

Is an E911/Address sign present, visible, and in good condition on the subject parcel? ☐ Yes ☐ No

AGRICULTURAL EXEMPTION WORKSHEET

For agricultural projects, please complete the worksheet below.

Zoning District: _____ **Number of Contiguous Acres Owned:** _____

Please indicate farm uses occurring on property _____

Agricultural Use for Planned Construction:

____ Farmhouse or Farm Dwelling ____ Machine Shop/Implement Storage ____ Livestock shelter/animal waste storage
____ Grain, fuel, or other ag-product storage ____ Other farm use (please specify) _____

1. Is the applicant actively engaged in the farm operation on the subject parcel? ☐ Yes ☐ No
2. If the Exemption Application is for a proposed farmhouse, is the occupant of the proposed farmhouse engaged in agriculture on the parcel where the house is located? ☐ Yes ☐ No
3. Does the applicant file a Schedule F OR include gross farm receipts from a corporation on line 10 of a Form 1120 corporate income tax return? (Copy is not required or requested.) ☐ Yes ☐ No
4. Please provide any information which may be helpful in reviewing the application to determine if the proposed building or structure is primarily adapted, by reason of nature and area, for use for agricultural purposes, while so used. (Attach if necessary.)

NOTE: Projects subject to conditional use, variance, or zoning change must file a request prior to a building.

APPLICATION CHECKLIST

Use the checklist below to make sure you have all the required information included with your application. A complete application with required documentation must be submitted.

☐ **Completed Application**

☐ **Drawing/Site Plan Showing:**

 * **Location and dimensions of planned construction**

 * **Distance from all property lines (Front from right of way line)**

☐ **Floor Plan (Blueprints) or schematic (The # of bedrooms and/or bathrooms must be detailed, if applicable.)**

☐ **Return to: Mitchell County Planning & Zoning 212 S 5th Street Osage, Iowa 50461 PH: 641-832-3943**

I, the applicant, being duly sworn, depose and say that I am the owner, or that I am authorized and empowered to make affidavit for the owner, that the application and plan are true and contain a correct description of the proposed building, lot, work, and use to which structure is to be placed; that I may not initiate improvements until the permit has been issued. I also understand that any violation of any of the above provisions may bring legal action against me by Mitchell County. The Planning & Zoning staff is also given permission to enter the above property in reviewing this Application.

Signature of Applicant _____

Date _____

• Zoning Administrator will request the permit fee payment upon approval of the application. A copy of the building permit will be provided to the applicant and to the Assessor's office. Fee schedule can be located online on the Mitchell County website.

OFFICIAL USE ONLY

Zoning District: _____

Does the structure meet setbacks and height requirements? ☐ Yes ☐ No

Will the structure be built in the floodplain? ☐ Yes ☐ No If yes, flood plain permit number: _____

Is a well or septic permit needed? ☐ Yes ☐ No

Was a Conditional Use/Variance granted? ☐ Yes ☐ No

Has an E911 address been assigned? ☐ Yes ☐ No Is an E911 sign needed? ☐ Yes ☐ No

Is a driveway/entrance permit needed? ☐ Yes ☐ No

Fee Amount: _____ Date Fee Collected: _____

Signature: _____

Date: _____

Mitchell County Zoning Administrator

Please sketch the site plan below with the distances from the property lines and other structures. Along with location and dimensions of planned construction.

Note: You can also send a google earth drawing of your placement and setback distances.

Example:

**Site Plan:**This image shows a full page of blank graph paper. The grid consists of small, equal-sized squares formed by thin black lines. There are no margins, text, or other markings on the page.