

Residential Building Permit Application

City of Argo

Date Submitted: _____

Permit Number: _____

Location of property _____
(Street address, Parcel ID, or Subdivision and lot #)

Type of Work

New Building

Demolition

Retaining Wall

Building Addition

Foundation Only

Window Replacement

Building Renovation

Moving Structure

Accessory Structure

Roof/Siding

Fence (over 7 feet)

Other: _____

Written description: _____

ADEM permit #	Sewer or Septic Approval #	Total Value of Project
_____	_____	\$ _____

Property Owner Information:

Name: _____ Address: _____

Phone: _____ Email: _____

Contractor/Builder Information:

Name: _____ Address: _____

Phone: _____ Email: _____

This is an APPLICATION ONLY.
All required documents must be
Submitted, Reviewed, and APPROVED
prior to a Permit being issued.