



TOWN OF LEEDS

218 NORTH MAIN STREET
PO BOX 460879
LEEDS, UT 84746-0879
PHONE: 435-879-2447 FAX: 435-879-6905
E-mail: clerk@leedstown.org // Website: www.leedstown.org

SUBMITTAL PROCESS FOR BUILDING PERMITS

TIME FRAME:

Approximately twenty-one (21) days from initial application.

Applicant or representative will submit application to Leeds Town Staff for approval.

1. The Building Permit Application Packet is available at Town Hall and Town website. A filing fee for the building permit application is \$100.00
2. Complete the packets per instructions and deliver to Town Staff at Leeds Town Hall.
3. Applicant will be scheduled with Town Staff for a Preliminary Building Plan Review. Town Staff will review the information for compliance with Leeds Land Use Ordinances. [The Land Use Ordinance is available for download on the Town website: www.leedstown.org.]
4. Plan Examiner will review the building plans for compliance with all applicable codes. This process takes about five (5) to ten (10) business days.
5. After the examination is completed, Town Staff will contact the applicant to pick up one set of the building plans and pay all applicable fees.

Building Permit & Impact Fees:

a. Building Permit	
1. Building Permit Filing Fee	\$100.00
2. Building Permit Fee	Based on Valuation
3. Building Permit Extension Fee	1% of evaluation of home
b. Excavation Permit	Based on Volume of earth moved
c. Excavation Plan Review	Based on Volume of earth moved
d. Impact Fees	
1. Park Impact Fee	\$1,300.00
2. Road Impact Fee	\$3,295.00
3. Public Safety Impact Fee	\$525.00



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Please review ALL information provided in this packet prior to submitting your Building Permit Application and packet sets. It is your responsibility to provide all information as required. Fees for copies not included as required below will be included and charged back to applicant. Please retain a copy of all documents for your records.

1. PROVIDE TWO (2) FULL SIZE SETS OF BUILDING AND SITE PLANS. Building and site plans must include plot indicating property location, site address, building, and sanitation layouts.
2. PROVIDE PACKET INCLUDING EACH OF THE FOLLOWING:
 - a. Size 24" x 30" or larger of the building and site plans including plot indicating property location, site address, building and sanitation layouts. These must have all the same information provided in the full size set of site plans in I. above.
 - b. Copies of the completed Bldg. Permit Application. Complete all blocks above the 'Building Inspector/Office Use Only' line. Include the cost of construction of work - this includes the costs associated with building the structure including material time and labor. It does not include the price of the land. The Building Inspector must authorize this cost prior to issuance of the building permit license.
 - c. Proof of the Percolation Test and Septic Permit. Percolation test must be completed by an Environmental Scientist and submitted to the Washington County Health Department for a septic permit. More than one lot (i.e.: Subdivision) must include a Letter of Feasibility from the Washington County Health Department. Contact Southwest Utah Public Health: 435-673-3528 to obtain your permit.
 - d. Proof of Water Service from applicable water provider. Subdivisions must also include a Utah State Water Engineer's Report.
 - e. A copy of the current contractor license and business license.
 - f. Subdivision CC&R's, if applicable.

THE FOLLOWING FORMS ARE PROVIDED IN THIS PACKET AND ARE TO BE INCLUDED IN THE PACKETS [ABOVE]:

1. *Attachment 1.* Letter from Leeds Area Special Service District (LASSD) to show compliance with current International Fire Code. Contact: (LASSD), Steve Lewis, Fire Chief, 879-2881.
2. *Attachment 2.* Completed Land Use Development Permit Application.
3. *Attachment 3.* Give Gas Sizing Form to your Plumber if installing Natural Gas.
4. *Attachment 4.* If you are the Owner/Builder, complete the Owner/Builder Certification and Agreement. This form requires authorization by a Notary Public.
5. *Attachment 5.* Encroachment Permit Application. Complete at the time work is scheduled and submit to Town Hall. The application is included in this packet. Note all associated encroachment fees are in addition to Building Permit Application fees.
6. *Attachment 6.* Completed Building Permit Application Checklist.

TOWN OF LEEDS BUILDING PERMIT APPLICATION PERMIT NO. _____

JOB ADDRESS:		ZONE:	
LEGAL DESCRIPTION / SUBDIVISION :	LOT #:	PARCEL ID #:	
OWNER NAME:			
Mailing Address		Contact Phone:	
CONTRACTOR NAME:		CONTRACTOR LICENSE #:	
Mailing Address		Contact Phone:	
ELECTRICAL CONTRACTOR:		CONTRACTOR LICENSE #:	
Mailing Address		Contact Phone:	
PLUMBING CONTRACTOR:		CONTRACTOR LICENSE #:	
Mailing Address		Contact Phone:	
CLASS OF WORK: New <input type="checkbox"/> Mfrd <input type="checkbox"/> Stick <input type="checkbox"/> Garage <input type="checkbox"/> Pool <input type="checkbox"/> Repair <input type="checkbox"/> Alteration <input type="checkbox"/> Addition <input type="checkbox"/> Move <input type="checkbox"/> Remove <input type="checkbox"/> Other <input type="checkbox"/>			
USE OF BUILDING: Residence <input type="checkbox"/> Storage <input type="checkbox"/> Other, specify: _____			
SETBACKS FROM PROPERTY LINE (FEET): Front: _____ Rear: _____ Side: _____ Side: _____		# of Outbuildings: _____	LOT SIZE: _____
COST OF CONSTRUCTION: \$ _____		NOTES / COMMENTS:	
<p>NOTICE TO CONTRACTOR, AUTHORIZED AGENT, OWNER/BUILDER: SPECIAL PERMITS MUST BE OBTAINED TO CUT UP STREETS IN MAKING SEWER & WATER CONNECTIONS, DRIVEWAYS, CURBS, ETC. THIS PERMIT BECOMES NULL & VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR 180 DAY PERIOD 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 PROVISION OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.</p> <p>SIGNATURE OF CONTRACTOR, AUTHORIZED AGENT or OWNER <u>ONLY IF OWNER BUILDER</u></p>			
BUILDING INSPECTOR / OFFICE USE ONLY			
SQ. FOOTAGE:		Occupancy Group:	Division:
Level 1: _____ Outbldg: _____	Level 2: _____ Basement: _____	# of Dwelling Units:	# of Stories:
Level 3: _____ Other: _____	Garage: _____	Maximum Occupancy Load:	Special Approvals
TOTAL SQ. FOOTAGE: _____			Req'd.
TYPE OF CONSTRUCTION:	Fire Sprinklers Required:	Water	Recv'd.
	Yes <input type="checkbox"/> No <input type="checkbox"/>	Septic/Sewer	
	Off-Street Parking:	Flood Plain	
	Covered <input type="checkbox"/> Uncovered <input type="checkbox"/>	Right-of-Way	
IMPACT FEES:	BLDG PERMIT FEE:	City Engineer	
	PARKS: \$ _____	*SURCHARGE:	Other - Specify
SAFETY: \$ _____	*(1% of Building Permit Fee) \$ _____	TOTAL TO: LASSD	
	PLAN CHECK FEE: \$ _____	.2% (.002) of Cost of Construction \$	
2. TOTAL IMPACT: \$ _____	1. TOTAL BLDG: \$ _____	TOTAL TO: TOWN OF LEEDS	
		← TOTAL OF 1 AND 2: \$ _____	
APPLICATION APPROVED BY BUILDING INSPECTOR _____ Date _____		PLAN CHECK OKAY BY: _____	
PAYMENT RECEIVED BY CLERK/RECORDER OR TREASURER _____ Date _____			

*1% SURCHARGE - STATE DEPARTMENT OF COMMERCE, DIVISION OF OCCUPATIONAL AND PROFESSIONAL LICENSING



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LEEDS AREA SPECIAL SERVICE DISTRICT (LASSD)

FIRE DEPARTMENT APPLICATION FOR BUILDING PERMIT *Attachment 1*

Single family dwelling: Yes _____ No _____
Commercial: Yes _____ No _____
Subdivision: Yes _____ No _____

Name: _____

Building Address: _____

Contact Phone Number(s): _____

Contractor Name: _____

Contractor Phone Number: _____

Please provide the following information:

For Single Family Dwellings:

- Plot plan with the streets and current hydrants on it.
- Measured distances marked on plot map.
- Square footage of home.

For Subdivisions and Commercial:

- You must contact the Fire Chief for review of plans.
- Review can take seven (7) to ten (10) working days after plans have been submitted. In some cases, Systems review may take longer.
- Some systems may require outside review and any additional costs will be paid by applicant.

Applicant's Signature

Date

I find this applicant has met the requirements set forth by the International Fire Code.

Steve Lewis, Fire Chief

Date



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LAND USE DEVELOPMENT

PERMIT APPLICATION

Attachment 2

Name of Owner/Builder _____

Physical Address _____

Mailing Address _____

Home Phone _____ Business Phone _____ Cell Phone _____

LOCATION OF CONSTRUCTION SITE

Address _____

Subdivision Name _____

Lot No. _____ Tax ID Parcel No. _____ Zoning _____

Signature

Date



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GAS SIZING INSTALLATION PLAN APPLICATION

COMPLETE FORM IF INSTATLLING NATURAL GAS
Attachment 3

Installer's Company: _____
Business Phone: _____ Cell Phone: _____
License # _____ Permit # _____
Subdivision: _____ Lot # _____ Phase: _____
Project Address: _____
Date: _____ BTU/Cubic Feet: _____ Inspector: _____
Fuel line sized for: 4 oz. Delivery Pressure _____ **-OR-** 2 lb. Delivery Pressure _____
Test Pressure: _____

For Inspection please contact Dennis Mertlich, Building Inspector at 435-635-9935

Total Length: _____ Total C.F.H. _____

Approved By: _____
Building Inspector Date



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OWNER/BUILDER CERTIFICATION AND AGREEMENT TO COMPLY WITH THE CONSTRUCTION TRADES LICENSING ACT *Attachment 4*

Owner/Builder Name: _____

Address, City, State, Zip: _____

Contact Phone Number(s): _____

Address of Construction Site: _____

Subdivision Name: _____ Lot No. _____ Tax ID Parcel No. _____

CERTIFICATION

I, _____, certify under penalty of perjury that the following statements are true and correct and are based upon my understanding of the Utah Construction Trades Licensing Act:

1. I am the sole owner of the property and construction project at the above described location.
2. The improvements being placed on the property are intended to be used and will be used for my personal non-commercial, non-public use.
3. I understand that work performed on the project, if it is the type of work which is regulated under the Construction Trades License Act, and Rules of the Contractors Licensing Board, must be performed by the following:
 - a. myself as the sole property owner; or
 - b. a licensed contractor; or
 - c. my employee(s) on whom I have worker's compensation insurance coverage, on whom required payroll taxes are withheld and with respect to whom I comply with all other applicable employee/employer laws; or
 - d. any other person working under my supervision as owner/builder to whom no compensation is paid; and
4. I understand that if I retain the services of an unlicensed contractor or compensate an unlicensed person, other than as an employee for wages, to perform construction services for which licenser is required, I may be guilty of a Class A Misdemeanor and may be additionally subject to an administrative fine in the maximum of \$2,000.00 for each day on which I violate the law.

Dated this _____ day of _____, 20 _____.

Printed Name of Owner/Builder _____

Signature of Owner/Builder _____

Subscribed and sworn before me this _____ day of _____, 20 _____ in the County of Washington, State of Utah.

Notary Public _____



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**APPLICATION FEE: \$125.00
NON-REFUNDABLE**

Completion Guarantee Deposit

Encroachment Bond

DATE: _____

RECEIVED BY: _____

APPLICATION FOR RIGHT OF WAY ENCROACHMENT PERMIT

*Work cannot begin until permit is granted
Attachment 5*

Date: _____

Application is hereby made by: _____

Address: _____

Explain project: _____

Project Address/Location: _____

Attach two copies of the plan for the encroachment work. If possible, new underground utility installation crossing a paved road should be placed by boring. In any case, show the extent to which the Town Right-of-Way will be disturbed by placing poles or underground lines. Include length, width and depth of trenches for underground lines; or vertical clearance and voltage of overhead lines.

Construction to begin on or about: _____ and will be completed on or before: _____.

An application fee of \$125.00 will be assessed to all work to defray costs of processing the application & inspecting any remedial work done.

A completion guarantee deposit fee of:

Pavement (including chip/seal).....\$3,000.00 up to 70 sq. ft...._____ sq.ft. = \$_____

Pavement (including chip/seal)...\$45.00 per sq. ft. over 70 sq. ft...._____ * 45 = \$_____

Gravel Surface.....\$6.00 per sq. ft....._____ * 6 = \$_____

Unimproved Surface.....\$3.00 per sq. ft....._____ * 3 = \$_____

Totaling _____

The portion not required to complete the work will be returned on final inspection by the Town Engineer. If this permit is granted, the applicant agrees to abide by all of the restrictions and regulations contained in the Leeds Right-of-Way Encroachment Ordinance. In addition, safe vehicle and pedestrian traffic conditions must be maintained, including following the guidelines of Part IV of the Manual on Uniform Traffic Control Devices (MUTCD).

NAME OF APPLICANT – OWNER OR CONTRACTOR

SIGNATURE

TITLE



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BUILDING PERMIT APPLICATION CHECKLIST

Attachment 6

Use the following as a checklist for the packets you provide. If you do not have all information listed please complete the explanation block below.

- ___ Two sets of full size sets of building and site plans.
- ___ Percolation Test documentation from Health Department.
- ___ Proof of Septic Permit from Health Department.
- ___ Proof of water service from culinary water provider.
- ___ Proof Leeds Area Special Service District (LASSD) requirements have been met and signed by Fire Chief.
- ___ Utah Department of Health sanitation requirements have been met.
- ___ Do you have irrigation water rights? If yes, how many shares? _____
- ___ The Uniform Construction Safety Standards have been met.
- ___ Plans and final development meet all current ordinances and zoning requirements of the Town of Leeds.
- ___ Plans for construction/development and use of property comply with the current Town of Leeds General Plan.

Explanation if any of the above requirements have not been met:

Date _____ Signature(s) of Owner(s) of Property

PRINT NAME SIGNATURE

PRINT NAME SIGNATURE

PRINT NAME SIGNATURE

Deliver all completed documents to Clerk/Recorder at Leeds Town Hall. At this time you will be scheduled to meet with a Planner for the Plan Review. Plan to allow a minimum of thirty (30) days prior to scheduling presentation with the Planning Commission *IF APPLICABLE*. Leeds Planning Commission Meetings are held the 1st Wednesday of each month unless otherwise noticed. Applicant or his representative must be present at the Planning Commission Meeting. Failure to appear will cause your request to be scratched from the agenda and it will be your responsibility to contact Town Hall to re-schedule.

NO BUILDING WILL BEGIN

Until approval from the Town Planner & Clerk is obtained, and all building fees are collected.



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BUILDING and DEVELOPMENT REQUIREMENTS

Buildings and structures requiring a permit include, but are not limited to:

- Any structure which purpose shall be residential or commercial occupancy.
- Any structure exceeding 120 square feet in area.
- Any structure containing plumbing or electrical fixtures.
- Any structural modification to an existing building, including room additions or expansion.

The following are requirements from the International Building Code and are included in this packet for your information.

1. Complete signed and sealed (as required by applicable laws) architectural plans, structural plans, and material specifications of all work.
2. Site plans include the following information:
 - a. Size and location of all new construction and all existing structures on the site.
 - b. Distances from lot lines.
 - c. Established street grades and proposed finish grades, if applicable.
3. Architectural Plans and specifications include:
 - a. Description of uses and the proposed use group(s) for all portions of the building and the design approach for mixed uses, as applicable.
 - b. Proposed type of construction of the building.
 - c. Fully comply with Land Use Ordinance for starting point for all structures. This must be approved by the Planning Commission and an Architectural Committee if applicable to your property.
 - d. Adequate details and dimensions to evaluate means of egress, including occupant loads for each floor, exit arrangement and sizes, corridors, doors, stairs, etc.
 - e. Exit signs/means of egress lighting, including power supply.
 - f. Accessibility scoping provisions.
 - g. Adequate details to evaluate fire resistive construction requirements, including data substantiating required ratings.
 - h. Details of plastic, insulation, and safety glazing installation.
 - i. Details of required fire protection systems.
4. Structural plans, specifications, and engineering details to include:
 - a. Soils report indicating the soil type and recommended allowable bearing pressure and foundation type.
 - b. Signed and sealed structural design calculations which support the member sizes on the drawings.
 - c. Local design load criteria, including (as applicable): frost depth; live loads; snow loads; wind loads; earthquake design data; other special loads.
 - d. Details of foundations and superstructure.
 - e. Provisions for required special inspections.
 - f. Applicable construction standards and material specifications (i.e., masonry, concrete, wood, steel, etc.).



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CONTACT NUMBERS

IMPORTANT! Keep this list for reference throughout construction completion.

Building Inspection: Dennis Mertlich, Building Inspector at 435-635-9935

Leeds Domestic Water Association (LDWA): 435-879-0278

Leeds Area Special Services District (LASSD): Fire Chief Lewis at 435-879-2881

Questar Gas: 435-673-7514

Rocky Mtn. Power: 888-221-7070

Trash Collection: Leeds Town Hall 435-879-2447 to establish account

Century Link Phone Company: 877-290-5458

Upon completion of all building inspections, you will receive a Certificate of Occupancy (CO) from the Leeds Building Inspector.

You will need to contact Town Treasurer to begin Trash Service at that time.

NOTE REGARDING LASSD FEE

LEEDS AREA SPECIAL SERVICE DISTRICT (LASSD) NOTICE OF IMPACT FEE ORDINANCE EFFECTIVE JUNE 1, 2005.
The Leeds Area Special District (LASSD) has enacted Impact Fees on all development and construction within the boundaries of its' service area. Revenues from impact fees will be used to partially offset expenses of new and enhanced public safety facilities (Fire Stations). A receipt for payment of the Impact Fee must be presented to the Town of Leeds Clerk/Recorder. The Town of Leeds Building Department will collect the LASSD Impact Fee in conjunction with collection of the Building Permit Fee.

FEE AMOUNT CALCULATION. The fee is determined by taking .2% (.002) of the building department determined cost of construction. To calculate the fee, multiply the Cost of Construction dollar amount by .002. Please note the fee varies with the Cost of Construction of the building. There is no minimum or maximum fee amount.



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TRASH COLLECTION FORM

NEW ACCOUNT? YES _____ NO _____

If NO, please give previous name on account _____

Termination date: _____

New name on account: _____

Date account opened: _____

Physical address of Trash Collection: _____

Mailing address: _____

Contact phone: _____

Number of cans requested: _____

Notes:

Would you like to be on the town email list to receive
information on meetings, public notices, general
information and reminders for the Town of Leeds? YES _____ NO _____

Email address: _____