

**APPLICATION FOR CONSTRUCTION
AND/OR OCCUPANCY COMPLIANCE CERTIFICATE**

City of Monona, Iowa

Applicant: _____ Date: _____
Address: _____ Certificate No. _____
_____ Phone: _____

- I hereby request:
- Construction Compliance Certificate
 - Occupancy Compliance Certificate
 - Build
 - Alter Buildings or Structures
 - C-2 Zoning – Dwelling Unit Ground Level
 - C-2 Zoning – Dwelling Unit Second Story

On Described Premises: _____

Proposed Improvements: _____

Construction Materials: _____

Parcel No. _____ Zoning District: _____

Front Yard Setback: _____ Dimensions: _____

Side Yard Setback: _____ Estimated Cost: \$ _____

Rear Yard Setback: _____ Off-Street Parking: _____

Signage: _____ On-Street Parking: _____

Principal Use: _____

Accessory Use: _____

Other Information _____

I Certify that the above information is true and accurate and that the construction and use as noted will comply with 'Certificate' specifications and Zoning Ordinances in all respects, knowing the construction may be monitored for 'Compliance' with issued Certificate. Failure to comply will result in penalties and corrective action as specified in the Monona Code of Ordinances Chapter 40.

My signature hereto attached confirms I am fully aware and understand the requirements of this permit.

Applicant Signature: _____

Site Plan

Please draw your existing property with new structure. Label Distances from Property Lines. Label the Front, Side & Rear of property [Or attach a separate site plan drawing]

FOR USE BY ADMINISTRATIVE OFFICER

Special Exception Variance Required Describe: _____

Construction Compliance Certificate is hereby Granted Denied

Certificate No. _____ Date: _____ Fee: \$ _____

Reason for Denial _____

Occupancy Compliance Certificate is hereby Granted Denied

Certificate No. _____ Date: _____ Fee: \$ _____

Reason for Denial _____

Signed/Dated: _____, Administrative Officer

C-2 Ground Level Dwelling Unit Floor Plan Granted Denied

Reason for Denial _____

C-2 Second Story Dwelling Unit Floor Plan Granted Denied

Reason for Denial _____

Signed/Dated: _____, City Fire Chief

Signed/Dated: _____, Administrative Officer