

**TOWN OF NEWELL**  
**BUILDING PERMIT APPLICATION**

PO Box 405 • 101 E Third Street • Newell, SD  
57760  
Phone: 605-456-2737 • Fax: 605-456-9820  
e-mail: newell@sdplains.com

Permit No: \_\_\_\_\_  
Permit Cost: \_\_\_\_\_  
**Permit must be paid after approval.**

**Building Permit** – A permit issued by the Building Inspector, certifying that such building, as proposed, would be in compliance with the provisions of this ordinance and with the building Code. If within six (6) months of the date of issuance of said Building Permit, the proposed construction has not started and upon showing valid cause the Building Inspector may before expiration of original permit grant an extension not to exceed 6 months. All Building Permits shall expire in one (1) year of original date of issuance, a one year renewal may be granted by the Building Inspector upon showing valid cause. If not completed within 2 years from issue date a new permit must be applied for with current fees. \_\_\_\_\_ IN

**BUILDING ADDRESS:** \_\_\_\_\_  
**LEGAL DESCRIPTION:**      **Lot:** \_\_\_\_\_ **Block:** \_\_\_\_\_ **Addition:** \_\_\_\_\_

**RESIDENTIAL:**    New Home    Addition    Garage    Remodel    Shed    Mobil home    \_\_\_\_\_ age    Other \_\_\_\_\_

**COMMERCIAL:**    New Bldg    Addition    Fence    Remodel    Other \_\_\_\_\_

**MATERIAL:**       Frame       Rigid Frame Steel Bldg       Masonry       Other \_\_\_\_\_

**SIZE OF BUILDING:** Width: \_\_\_\_\_ feet   Length: \_\_\_\_\_ feet   Total Floor Area (SQ FT) \_\_\_\_\_

**No. of Stories:** \_\_\_\_\_ **Basement:**    No    Yes   if yes, size: \_\_\_\_\_

1. **Lot width:** \_\_\_\_\_
2. **Lot area:** \_\_\_\_\_
3. **Height of structure:** \_\_\_\_\_
4. **Yard set backs (distance from lot line)**  
    **Front yard:** \_\_\_\_\_    **Side yard:** \_\_\_\_\_    **Rear yard:** \_\_\_\_\_

**Cost of Alterations, additions or value of new structure:** \$ \_\_\_\_\_

**Building to be used as:** \_\_\_\_\_

**Size of Lot:**      **Front:** \_\_\_\_\_ feet      **Depth:** \_\_\_\_\_ feet      **Lot Area (SQ FT)** \_\_\_\_\_

Are there other buildings existing on the lot? \_\_\_\_\_ If so, please specify: \_\_\_\_\_

**FENCING:** Type of fence \_\_\_\_\_ Height: \_\_\_\_\_ Setback from property line: \_\_\_\_\_ feet

Remodel Information: \_\_\_\_\_

**NAME OF OWNER:** \_\_\_\_\_

Present Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

**GENERAL CONTRACTOR:** \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

**ELECTRICIAN:** \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

**PLUMBER:** \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

PROPERTY LINE

N

W

E

S

PROPERTY LINE

I hereby acknowledge that I have read 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.

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Date: \_\_\_\_\_

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Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Denied by: \_\_\_\_\_ Date: \_\_\_\_\_

Reason Denied: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*The Town of Newell is an equal opportunity provider and employer.*

*"If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at [program.intake@usda.gov](mailto:program.intake@usda.gov)."*