



Lake Arrowhead

C O M M U N I T Y , I N C .

NOTE: ALL APPLICABLE FEES MUST BE PAID IN FULL BEFORE THIS APPLICATION WILL BE REVIEWED FOR APPROVAL. ANY BUILDING PROJECT WHICH REQUIRES A TOWN, SRCC, OR DEP PERMIT ALSO REQUIRES A LAC PERMIT.

Application Number: _____ Date of Application: _____ Date you Plan to Start: _____ Completion Date: _____

1. **Location of Construction - Lot#** _____ Street: _____ Town: _____
2. **Owner:** _____ Mailing Address: _____ Phone No. () _____
3. **Builder's Name:** _____ Phone No. () _____
4. **Builder's Address:** _____ City: _____ State: _____ Zip : _____
5. **Use of Structure:** Personal Dwelling: _____ Other (Specify): _____
6. **Size of Structure:** _____ X _____ Height: _____ **Number of Stories** (not including cellar/basement): _____
7. **Distance to Property Lines:** Front _____ Left Side _____ Right Side _____ Other: _____
8. **Basement:** Yes [] No [] **Slab:** Yes { } No { } **Crawl Space:** Yes { } No { } **Other:** _____
9. **Material of Foundation:** _____ **Depth Below Adjoining Grade:** _____
10. **Stick Built:** Yes { } No [] **Modular:** Yes [] No [] **Panelized:** Yes [] No [] **Siding Material** _____
11. **Site Visit:** Date _____ Time _____ Done By: _____

Comments: _____

BUILDING PERMIT CHARGES

Owner's Name: _____

Date Submitted: _____

Lot(S) Number(S): _____

Builder's Name: _____

Building Permit Fee: \$ 50.00

*Annual Member Fee: _____

Or Pro-Rated Annual Fee: _____

TOTAL AMOUNT DUE: \$ _____

- NOTE: Individuals submitting a building permit must be a member in good standing (all annual fees/accounts must be paid-in-full).
- I am aware that it is my responsibility to contact Dig Safe prior to building and provide LAC with the Ticket Number.

LACI BUILDING PERMIT REQUIREMENTS

(It Is The Responsibility Of The Applicant To Meet All Applicable Requirements)

- Town Building Permit
- Site Plan (Scaled At Not Less Than 1" = 20')
- Floor Plan (W/ Front And Side Elevations, Showing Foundation Details)
- SRCC &/Or Dep Approval (Dep-Sec. 9 Only)
- Dig Safe Ticket Number: _____
- Tree Cutting Permit (if additional tree removal is necessary)

Signature Of Applicant: _____ Date: _____

In The Presence Of: _____ Date: _____

THIS PERMIT EXPIRES TWO YEARS FROM DATE OF APPROVAL.