

BUILDING PERMIT APPLICATION

MUNICIPALITY TOWN OF JOHNSTON		PROJECT NO/ NUMERICAL CODE			PERMIT NO			
Application received				Fee received				
Date		by		Date		by		
1 Site location		2. Zoning Dist.		3. Rehab Code		Y N		
4 Plat		5. Lot		6. Area		7. Prev. Use		
9 Owner		Address:		Tel.No.				
10 Contractor		Address:		Tel.No.				
11 RI Reg No. _____		12. Expir. date _____		13. Lead Lic No. _____		14. Expir date _____		
15. Architect/Engineer		Address		Tel No.				
16 RI Reg. No.		17. Stamped prints		Y N		18. Certificate of Occupancy Req?		
Y N		Y N						
20 Description of Work to be Performed				21. Use of each floor				
				BSMT.				
				1st				
				2nd				
				3rd				
				4th				
				5th				
				Other				
A TYPE OF IMPROVEMENT		B. OWNERSHIP			C. TYPE OF CONSTRUCTION (1 ONLY)			
1 New Structure		Public	Private		1. 1A	4. 2B	7. 4	
2 Addition to Existing		1. State	4. Taxable		1. 1B	5. 3A	8. 5A	
3 Modification to Existing		2. Municipa	5. Tax Exempt		3. 2A	6.3B	9. 5B	
4 Foundation Only		3. Other Specify						
5 Other Specify						*Limited to least of construction rating 1A highest 5B lowest		
D. Proposed Use Residential		E. Proposed use Non-residential			F. Residential Uses		New Renovate	
1 R-1 Hotels		1. A1 Theater	13. B Business	Single Family Dwellings & Townhouses SBC-2				
2 R-2 Apartments		2. A2 Rest/Nightclub	14. E Education	1 Total Single Family Units				
3 R-3 Residential		3. A3 Assembly Rec	15. 11 Inst. Supervised	2 Total No. of Bedrooms				
4 R-4 Assited Living		4. A4 Assembly Arena	16. 12 Inst. Incarcerate	Total No. of Baths	3. Full	4. Half		
5 Garage / Carport		5. A5 Assembly Outdoor	17. 13 Inst. Restrained	Multi-Family Dwellings SBC1 R2				
6 Manufactured Home Hud		6. F1 Factory Mod	18. 14 Inst. Day Care	5. Total No. of Kitchens				
7 Modular Home (IIBC)		7. F2 Factory Low	19. M Mercantile	Total No. of Baths	6. Full	7. Half		
8 Swimming Pool		8. H1 H HZ Detonate	20. S1 Storage Mod.	Total No. of Apartments by No. of Bedrooms				
9 1 +2 Family Detach SBC2		9. H2 H Hz Def	21.S2 Storage Low	8. Effic.	9. 1 Br	10. 2Br		
10 Fireplace		10. H3 H Hz Physical	22. U Utility Misc.	11. 3Br	12. 4Br	12. 5Br		
11 Other Specify		11. H4 H Hz Corr. Toxic	23. Other	14. More Specify				
		12. H5 H Hz Mat Prod.	24. mixed use	15. Total Buildings in Project (Site)				
G. Foundation Setbacks		H. Building Dintensions		I Project Cost Material and Laobor				
From Property		1. Number of Stories				Value Mat/Labor	Fee Schedule	
1. Front		2. Basement Yes No		1 General		.00	.00	
2. Rear		3. Hight Ft		2 Electrical (Alarm Telecom)		.00	.00	
3. Left		4. Width Ft.		3 Plumbing/ Piping		.00	.00	
4. Right		Depth Ft.		4 Mechanical Heat Air Cond		.00	.00	
J. Flood Hazard Area		5. Bldg. Ft.print		5 Fire Suppression		.00	.00	
YES NO		6. Total Gross SF		6 Demolition		.00	.00	
1 Map #		K. Sewage Disposal		7 DLT Boiler		.00		
2 Zone		1. Public		8 DLT Elevator/ Lift		.00		
3 ELEV		2. Private						
FEMA map required		3. Oswts #		Total Project Cost		.00		
Date				Total Permit Fees		.00		
L. Off Street Parking		M. Water Supply		ADA / CE State Fees No. 23-27.3-108.2 @ 0.1% (0.001)				
1 Enclosed		1 Public		Radon Fee No. RIGL 23-61-8 (\$0.02/sf Residential.)				
2 Outdoors		2 Private		TOTAL FEES DUE				
		3 Individual WELL		Make Check or Money Order Payable to the "Town of Johnston"				

I hereby certify that I have full authority to make the foregoing application, that the application is correct, and that the owner of the building and the undersigned agree to conform to all the applicable codes and ordinances of this jurisdiction.

Applicant Signature: _____

For: _____

Tel No. : _____

email address _____

CODE EDITION

- 1 Boiler and Mechanical permits required
- 2 Elevator and Electrical permits required
- 3 SBC-2 max fee \$50.00
- 4 Local fee only