City of Anthon P.O. Box 160 301 E Main Street Phone: (712) 373-5218

CONSTRUCTION PERMIT

Please type or print legibly in ink Property Owner(s): Phone: Address: _____State ___Zip:____ Fax #: Cell#: E-mail: Site location/address: Describe proposal for Construction in the Right-of-Way (attach a drawing, if needed): CERTIFICATION: I/we, the undersigned, do hereby certify/acknowledge that: It is the property owner's responsibility to locate property lines and to review the abstract for easements and restrictive covenants. 2. The information submitted herein is true and correct to the best of my/our knowledge and upon submittal becomes public record; and 3. All additional required written and graphic materials are attached. Date: Property Owner(s): FOR OFFICE USE ONLY - APPLICATION SUBMITTAL CHECKLIST Received by: Date: Date Approved by Public Works Superintendent:______ Initial:_____

Date Approved by Mayor: Initial: