

BUILDING SAFETY DEPARTMENT
2101 O'NEIL AVENUE Suite 202, Cheyenne, WY 82001
(Phone) 307-637-6265 (Fax) 307-637-6366
building@cheyennecity.org

RESIDENTIAL DETACHED STRUCTURES:

____ (1) digital copy of footing/foundation plans (must be wet-stamped by a WY registered design professional, except those plans approved by city engineer.)

____ (1) digital sets of building plans

____ (1) Plot Plans/drainage plans

____ Residential Building Dept Application

Payment of fees is required at the time of submittal.

Applications are available on our website (cheyennecity.org)



A COMMUNITY OF CHOICE

Building Safety Department

2101 O'Neil Ave., Rm. 202

Cheyenne, WY 82001

(307) 637- 6265 telephone (307) 637-6366 facsimile

RESIDENTIAL Building Permit Application

Valuation of Work: \$		
Job Address:		
Legal Description:		
Lot:	Block:	Tract Size:
		Use Zone:
Applicant (Owner or Authorized Agent) Information:		
Owner/Agent Name:		
Owner/Agent: Address and Phone Number		
Contractor: Name		Contractor Phone #:
Architect: Name and Phone Number		
Engineer: Name and Phone Number		

For Office Use Only

Plan Review #:	
Permit #:	
Received By:	
Received Date:	
Permit Fee	
Plan Review Fee	
Right of Way Fee	
Temporary Power Pole	
Investigation Fee	
Master Plan Fee	
Residential Community Facility Fee (\$400/ unit)	
Foundation Quick Start	
Total Fees Due	
Fees paid by <input type="checkbox"/> cash	
<input type="checkbox"/> check # _____	
<input type="checkbox"/> escrow acct	
<input type="checkbox"/> credit card	

Subcontractors: (Must be listed or TBD if undecided. The following work will not be included in the permit if it is left blank.)

Electrical:	Contractor Class & License #:
Plumbing:	Contractor Class & License #:
Mechanical:	Contractor Class & License #:
Other:	Contractor Class & License #:

Work to be completed:

New ☐ Addition ☐ Remodel ☐ Repair ☐ Move ☐ Demolish ☐

Please answer the following questions:

Occupancy Classification: R-3 / U	Type of Construction: V-B	Manufactured Housing (or Mobile Home) <input type="checkbox"/>
Number of stories (above grade):		
Building areas in square feet:	Remodeled area:	
Main floor:	2nd floor:	Bonus room:
Basement:	Garage:	Deck/Porch:
Other:		

Foundation type:	Basement <input type="checkbox"/>	Slab-on-grade including foundation <input type="checkbox"/>	Crawl Space <input type="checkbox"/>	or	Block and Piers <input type="checkbox"/>
Basement condition:	Finished <input type="checkbox"/>	Unfinished <input type="checkbox"/>	or Square footage of Finished Area:		
Garage location:	Attached <input type="checkbox"/>	Detached <input type="checkbox"/>			
Jetted tub(s):	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Number of fixtures:		
Gas logs or fireplaces:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Number:		
Lawn sprinklers:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If Yes - Where?	Front <input type="checkbox"/>	Back <input type="checkbox"/>
Deck(s):	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Number and size:		

Description of Work: Complete description of the work done including any plumbing, mechanical (heating, ventilation, or air conditioning), electrical, fire sprinkler or alarm. *(Work is not included in the permit unless described in this scope of work.)*

WHICH ENERGY CODE COMPLIANCE PATH WILL BE USED?

Prescriptive Paths:

1. ☐ R-Value Computation (component values of thermal envelope; Table 402.1.1)
2. ☐ UA Alternative (assembly values, Table 402.1.3)
3. ☐ Total UA Alternative (total system values; trade-offs; REScheck)

Performance Path: ☐ (\$ to operate; home energy rating, such as Energy Star, REM/Rate, HERS)

BY MY SIGNATURE AND UNDER PENALTY OF PERJURY, I HEREBY CERTIFY THAT I AM THE OWNER OF THE REFERENCED PROPERTY, OR THE OWNER'S AUTHORIZED AGENT. I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OR LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT.

THE ISSUANCE OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY STATE OR LOCAL LAW REGULATING CONSTRUCTION. THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS. IN ANY CASE, THIS PERMIT SHALL EXPIRE ONE YEAR AFTER DATE OF ISSUE.

Signature:

Date:

Name Printed:

Inspections and a Certificate of Occupancy/Completion are required prior to any occupancy of the structure.

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Permit / Plan Review Conditions:

	Approval	Date		Approval	Date
Address Assigned			Dev/Zoning		
Flood Hazard			Fire Review		
Traffic			Bldg Plan Review		
Tap Fees			Card Issued by		
BOPU			Approved for Issue by		
Historic District			Permit Issued by		



DEVELOPMENT SERVICES

PLOT PLAN CHECKLIST FOR ADDITIONS

Remember, Plot plan must be drawn to scale (minimum 1"= 30'). Plot plans that are not drawn to scale or are otherwise unreadable will not be reviewed and will be returned to the applicant. Plot plan must contain the following information:

- ☐ 1. A title block in the lower right hand corner, having the following:
 - ☐ a. Property Legal Description (Lot, Block, Subdivision)
 - ☐ b. Date of Drawing
 - ☐ c. Drawn by
- ☐ 2. North Arrow and Scale
- ☐ 3. Property dimensions
- ☐ 4. Easement Location(s) and Dimension(s)
- ☐ 5. Existing Building(s) on Lot (Size and Setbacks)
- ☐ 6. Proposed Addition(s) Location and Dimension(s)
- ☐ 7. Sidewalk and Curb Location and Dimension(s) (if applicable)
- ☐ 8. Driveway Width and Curb Cut Location and Dimensions (if applicable)
- ☐ 9. Street Name(s) and Right-of-Way Width(s)
- ☐ 10. FEMA or City-delineated SPECIAL FLOOD HAZARD AREA Boundaries
- If applicable, the PLOT PLAN SHALL BE PREPARED BY A WYOMING LICENSED PROFESSIONAL ENGINEER (P.E.) OR PROFESSIONAL LAND SURVEYOR (P.L.S.)
- ☐ 11. Notes - there must be notes APPLICABLE TO THE SPECIFIC PLOT PLAN
 - ☐ a. Current Zone District Designation
 - ☐ b. Erosion Control Methods to be Used During Construction
 - ☐ c. Certification of Conformance of Grading or Drainage Plan for the Subdivision (if applicable)
- ☐ 12. Property Coverage (square feet) include a calculation table for ALL IMPERVIOUS AREAS (include existing buildings, proposed buildings or additions, driveways and concrete)

For detailed parcel & zone district information, Please reference the CLCCGIS website at: <http://arcims.laramiecounty.com/> or contact the City of Cheyenne Development Office.

The applicant should submit TWO (2) copies of the plot plan along with the Building Permit Application. The original should be retained by the applicant so corrections could be made and amended copies could be submitted if required.

• Compliance Department • Development Department
2101 O'Neil Avenue, Suite 202, Cheyenne, WY 82001 • (Phone) 307-637-6265

Revised: 01/2014 JGB

② ALLEY ()' R/W

② STREET ()' R/W

P.E.
OR
P.L.S.
STAMP

N

SCALE: 1"= 1'

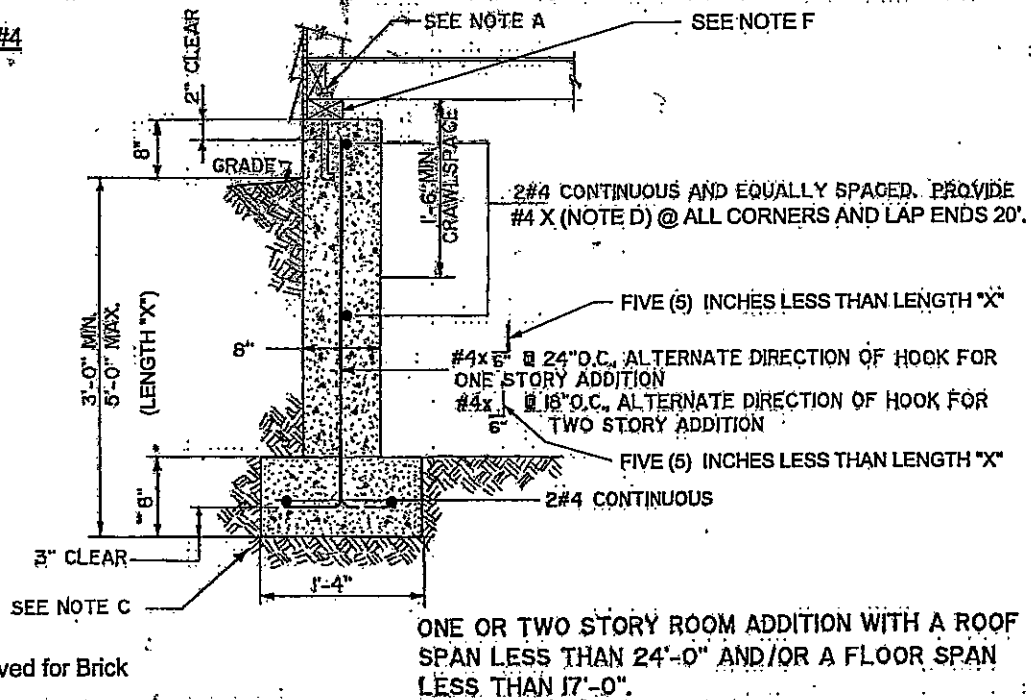
NOTE: ②

- a. Zoning ()
- b. Erosion Control ()
- c. Certification of conformance ()

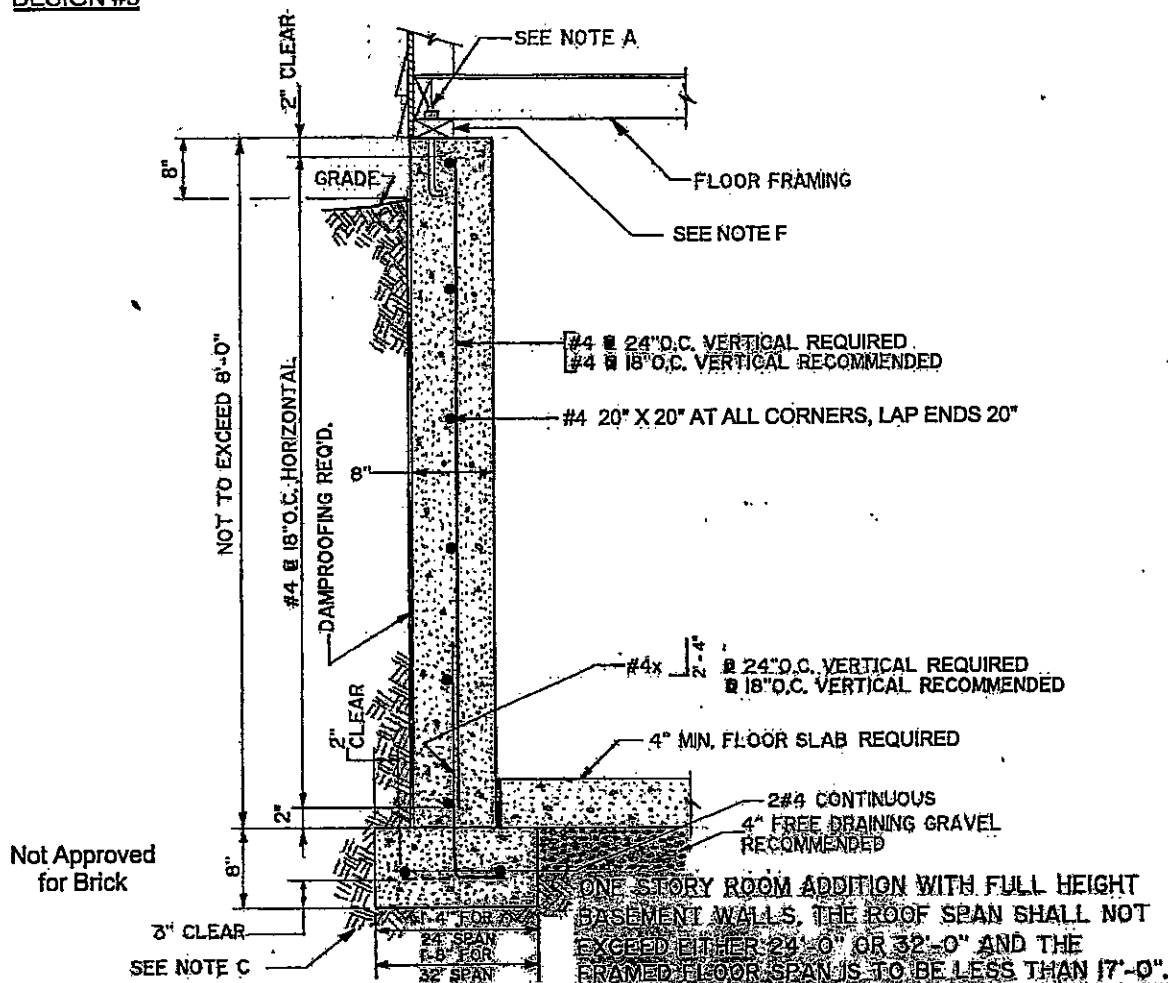
PROPOSED
ADDITION(S)
PLOT PLAN
LOT 1, BLOCK 1,
PLOT SUBDIVISION

DRAWN BY: DATE: / /

DESIGN #4



DESIGN #5



NOTE A: 1/2" DIAMETER BY 10" LONG ANCHOR BOLTS AT 6'-0" ON CENTER & WITHIN 12" OF ENDS & SPLICES.

NOTE B: NORMAL WEIGHT CONCRETE WITH A RECOMMENDED COMPRESSIVE STRENGTH OF 3000 PSI & ALL REINFORCING TO BE GRADE 60.

NOTE C: NATURAL UNDISTURBED SOIL WITH A MINIMUM BEARING CAPACITY OF 1500 PSF.

NOTE D: ● 20" 20"

NOTE E: ▲ 2'-2" 2'-2"

NOTE F: TREATED -OR- REDWOOD

NOTE: THESE FOUNDATIONS ARE NOT APPROVED FOR USE WITH EXPANSIVE SOIL CONDITIONS.

CITY OF CHEYENNE
MINIMUM FOOTING REQUIREMENTS FOR ADDITIONS
OR AS DESIGNED BY A REGISTERED ARCHITECT OR ENGINEER

SEE NOTE A

CONCRETE WALL

SEE NOTE F

SEE NOTE B

GRADE

8"

1'-0"

4" SLAB

4" MIN. NOMINAL

4" FREE DRAINING GRAVEL RECOMMENDED

#4x

#4x

4'-0" O.C. REQUIRED

24" 4'-0" O.C. RECOMMENDED

#4 CONTINUOUS TOP & BOTTOM PROVIDE #4 X (NOTE E) @ ALL CORNERS & LAP ENDS 20"

3" CLEAR

SEE NOTE C

(NOTE: NOT TO BE USED WITH GARAGES.)

SEE NOTE F
CONCRETE WALL
SEE NOTE B
SLAB
4" MIN. NOMINAL
4" FREE DRAINING GRAVEL RECOMMENDED
#4 X 10' @ 4'-0" O.C. REQUIRED
@ 2'-0" O.C. RECOMMENDED
2#4 CONTINUOUS AND EQUALLY SPACED BETWEEN #4 T&B. PROVIDE #4 X (NOTE D) @ ALL CORNERS AND LAP ENDS 20".
#4 CONTINUOUS TOP & BOTTOM REQUIRED PROVIDE #4 X (NOTE D) @ ALL CORNERS AND LAP ENDS 20".
#5 CONTINUOUS TOP & BOTTOM RECOMMENDED PROVIDE #5 X (NOTE E) @ ALL CORNERS AND LAP ENDS 20".
3" CLEAR
8"
3'-0"
8"
3" CLEAR
SEE NOTE A
2" CLEAR
GRADE
SEE NOTE G
ATTACHED OR UNATTACHED SINGLE

Not Approved for Brick

THICKENED EDGE AT SLAB PERIMETER RECOMMENDED PER

8" 1

8" 1

CONCRETE WALL

SEE NOTE A

SEE NOTE F

SEE NOTE B

THE TOP OF THIS SLAB MAY BE A MAXIMUM OF 8 INCHES BELOW THE TOP OF THE FOUNDATION.

GRADE

8"

2" CLEAR

4" MIN. NOMINAL

4" FREE DRAINING GRAVEL RECOMMENDED

#4x3'-1" LG. @ 2'-0" O.C.

3'-0" CLEAR

3'-0"

2#4 CONTINUOUS AND EQUALLY SPACED BETWEEN #4's TOP & BOTTOM. PROVIDE #4 X (NOTE D) @ ALL CORNERS AND LAP ENDS 20".

#4 CONTINUOUS TOP & BOTTOM REQUIRED PROVIDE #4 X (NOTE D) @ ALL CORNERS AND LAP ENDS 20".

#5 CONTINUOUS TOP & BOTTOM RECOMMENDED - PROVIDE #5 X (NOTE E) @ ALL CORNERS AND LAP ENDS 20".

Not Approved for Brick