

**City of Decorah**  
**Application For Compliance Certificate**

Owner Name: \_\_\_\_\_ Contractor Name: \_\_\_\_\_

Phone Number: (    ) \_\_\_\_\_ Estimated Cost of Construction: \$ \_\_\_\_\_

Construction Type:    \_\_\_ Residential    \_\_\_ Commercial    \_\_\_ Industrial

Street Address of Property: \_\_\_\_\_ Zone \_\_\_\_\_

Legal Description: \_\_\_\_\_

*Note: Applicant is responsible for accurate determination of property lines. Survey work required for determination is solely the responsibility of the applicant.*

To Construct: \_\_\_\_\_ Principal Use: \_\_\_\_\_

Property Setbacks: Front Yard \_\_\_\_\_ Side Yard \_\_\_\_\_ Rear Yard \_\_\_\_\_

Corner Lot? \_\_\_ No \_\_\_ Yes If yes, was it platted prior to 1973? \_\_\_ No \_\_\_ Yes (Refer to Code Chapter 17.16.040)

Variance Requested? \_\_\_ No \_\_\_ Yes If yes, indicate date granted \_\_\_\_\_

Compliance Certificate \_\_\_ Granted \_\_\_ Denied

Reason For Denial/Add'l Remarks \_\_\_\_\_

\* \* \* \* \*

**Tapping Permit**

**Owner is responsible for contacting Decorah Water Department (382-5171) prior to commencement of work**

\_\_\_ Water (\$250)    \_\_\_ Sewer (\$250)

Plumber: \_\_\_\_\_ Phone Number: (    ) \_\_\_\_\_

Work to commence within six (6) months of date of this application. Connection to be made in compliance with Iowa's Uniform Plumbing Code and Decorah City Code. For condominium construction, a separate shut off for water service for each unit is required as per Code Chapter 13.16.110.

\* \* \* \* \*

**Water Deposit For Construction Purposes**

City Code Chapter 13.16.180 requires a minimum deposit of \$100 for all construction projects. If desired, upon payment of deposit, applicant may have a plumber install a meter. All water used must pass through said meter. If applicable, upon removal, the City will refund the difference if cost for water used is less than deposit.

The undersigned hereby acknowledges he/she owns the property for which the certificate applies or he/she is duly authorized to represent the owner by way of this application.

Owner/Contractor \_\_\_\_\_ Date: \_\_\_\_\_

Zoning Administrator \_\_\_\_\_ Date: \_\_\_\_\_

Compliance Certificate	\$ _____
Tapping Permit:	\$ _____
Water Deposit:	\$ _____
<b>TOTAL FEES PAID:</b>	<b>\$ _____</b>

**CALL 811-IOWA ONE CALL BEFORE DIGGING**