

**Application for Building Permit**  
**City of Fonda, Iowa**

Owner's Name: \_\_\_\_\_

Owner's Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Legal description of lot to be used: \_\_\_\_\_  
\_\_\_\_\_

Description of proposed building or structural work.

(1) Type of building (dwelling, retail store, etc. If dwelling, state number of families: \_\_\_\_\_

(2) Use of building: \_\_\_\_\_

(3) Materials to be used: \_\_\_\_\_

(4) Horizontal dimensions of building (draw outline of exterior, showing all porches, balconies, and steps; with all exterior horizontal dimensions. Show whether porches and balconies are enclosed or un-enclosed. Show direction of North.)

(5) Height of building. \_\_\_\_\_ No. Of stories \_\_\_\_\_

Description of layout of the lot and the buildings.

(1) Front yard: Distance to front lot line \_\_\_\_\_

Distance from steps or unenclosed porches to front lot line: \_\_\_\_\_

(2) Side yards: Distance to lot line: North \_\_\_\_\_ South \_\_\_\_\_ East \_\_\_\_\_ West \_\_\_\_\_

(3) Rear Yard: Distance to rear lot line \_\_\_\_\_

Estimated cost of proposed building or structural work: \$ \_\_\_\_\_

Are detailed plans submitted with this application? \_\_\_\_\_

**I understand that this building permit must be approved by the Fonda City Council before any work can be started. Failure to do so could result in a fine of up to \$100 per day or the removal of the project to meet building codes. This permit is valid for one year. This permit authorizes construction of improvements specified. All installations subject to ordinances and inspection.**

Date: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

Approved this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Administrative Officer

Disapproved this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

**Straight Park Camper Cabin Reservation Form      Key Storage Box Code: \_\_\_\_\_**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Arrival Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_

Check-in time after 3:00 p.m.

Check-out time is 12:00 noon.

**Cabin Fees**

**April 15–October 15, 2014**

\_\_\_\_\_ Sunday–Thursday : \$35/night      \$ \_\_\_\_\_

\_\_\_\_\_ Friday–Saturday & Holidays: \$40/night (2 night minimum stay)      \$ \_\_\_\_\_

Per week : \$225      \$ \_\_\_\_\_

**Total Reservation Fee**      \$ \_\_\_\_\_

A \$50 refundable deposit is charged per stay.      Maximum stay is 2 weeks per group.

Total Reservation Fee: \$ _____	Deposit: \$ <u>50.00</u>
To expedite the return of your deposit, please write one check for the reservation and a separate check for the deposit. Make checks payable to <b>City of Fonda</b> .	

To hold your requested date(s), your reservation form and fees must be returned at least 14 days prior to arrival. Please call our office if your plans have changed. The cabin will become available to others after that date. Thank You!
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I, the undersigned, being 21 years of age or older, am authorized to make this reservation request. I agree to deposit with the City of Fonda a security deposit in the amount of \$50 (fifty dollars). I agree that this deposit may be applied by the City of Fonda to either wholly or partially satisfy and clean-up cost and/or damage to its property caused by persons utilizing the cabin. Further, I understand that if damages exceed the deposit, I, the undersigned, will be held responsible for full payment. I realize this reservation will not be processed without deposits and rental fee payments. The City of Fonda reserves the right to enter the cabins in cases of safety, maintenance or security problems. I agree to assume full responsibility for the acts, negligence or omissions of any and all persons in my group using the cabin.

**Renter's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

-----Office Use Only-----			
Received:	Deposit:	Check # _____	
Received:	Reservation Fee:	Check # _____	Date: _____

## Fonda Hometown Pride Brick Donation

Bricks will be displayed at the new Straight Park Gateway

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Donation (tax deductible): \$100/brick \$ \_\_\_\_\_

- Please use a separate order form for each brick ordered.
- Make checks payable to Fonda Hometown Pride.
- Return to: Fonda Hometown Pride, PO Box 367, Fonda IA 50540 or may be dropped off at Fonda City Hall.

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### Engraving on Brick

May have up to 3 lines.  
16 character per line, including spaces.  
Letters and number only – Please print clearly.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Examples of Engraving

In Memory of Jack & Jill Smith
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Jack & Jill Smith
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The Smith Family
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First Community Bank Fonda
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**Thank You!**