

**PLANNING & DEVELOPMENT**

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**Interior Remodel/Finish**  
**Construction Permit Application for**  
**Unincorporated Scott County**



**Owner Information**

**General Contractor Information**

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

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

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

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

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

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

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

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

Email: \_\_\_\_\_

Email: \_\_\_\_\_

\*\*Please indicate preferred contact for payment, permit inquiries, and inspections:

**Owner**

**General Contractor**

*Final Permit Fee is determined by Planning & Development upon review of this **completed** application packet. Fee is based on value and adopted fee schedule.*

Estimated Job Cost: \_\_\_\_\_

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**Property Information of Job Site**

Job Site Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Proposed Construction Description**

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

**REQUIRED SUBMITTAL CHECKLIST:**

**Signed & Completed Permit Application**

**Two (2) Sets of Detailed Floor/Building Plans**

I hereby acknowledge that I have read this application and state that the above is true and correct to the best of my knowledge and belief. I agree to comply with all applicable County Ordinances or City Ordinances and all State Laws regulating Building Construction. If any information provided is incorrect, the building permit may be revoked.

**Applicant Signature:**

\_\_\_\_\_

**Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_