



PLANNING & COMMUNITY DEVELOPMENT DEPT.
 BUILDING DIVISION
 2 PARK DRIVE SOUTH
 P.O. BOX 5021
 GREAT FALLS, MT 59403-5021
 406-455-8430 - PERMIT@GREATFALLSMT.GOV

Permit #: _____

ADU APPLICATION (Complete all applicable items)

Project Address: _____

Applicant/Point of Contact: _____ Phone: _____

Address: _____ Email: _____

General Contractor: _____ Phone: _____

Address: _____ Email: _____

Property Owner: _____ Phone: _____

Address: _____ Email: _____

Description of Work: _____

Valuation of Work: _____

☐ ATTACHED

☐ DETACHED

NOTE: ALL SIGNATURES MUST BE OBTAINED BEFORE SUBMITTING APPLICATION

☐ _____	Northwestern Energy, 1 1st Ave S (406)791-7500	_____	Date
☐ _____	Engineering Department, Public Works, 1025 25th Ave NE (406)771-1258	_____	Date
☐ _____	Environmental Department, Public Works, 1025 25th Ave NE (406)727-8390	_____	Date
☐ _____	Great Falls Fire Rescue, 105 9th St S (406)727-8070	_____	Date
☐ _____	Great Falls Addressing, Civic Center, Room 8 (406)455-8486	_____	Date
☐ _____	Great Falls Utilities, Civic Center, Room 104 (406)727-7660	_____	Date
☐ _____	Great Falls Floodplain Administrator, Civic Center, Room 112 (406)455-8430	_____	Date
☐ _____	Planning & Community Development Director, Civic Center, Room 112 (406)455-8430	_____	Date

I hereby certify that the above information is correct and the construction on, and the occupancy of the above described property will be in accordance with the laws, rules, and regulations of the State of Montana. **A written letter of authorization from the property owner, if other than the applicant, shall be submitted indicating knowledge of the applicant's intent.**

Signature of Applicant: _____ Date: _____

*** Applicant will be responsible for plan review fee if application is deemed abandoned after 180 days.**

FOR OFFICE USE ONLY:

Permit Entered By: _____	Fees Due: _____	Zoning Review Approval: _____	PCD Approval: _____
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