



# Concrete Permit

UPDATED – 07/24/2025

Pursuant to Salem City Ordinances & Design Standards

*The City of Salem is an equal opportunity provider, employer and lender.*

440 E JEFFERSON AVE  
 PO BOX 249  
 SALEM, SD 57058  
 Phone: (605) 425-2301  
 Email: [CitySalem@SalemSD.com](mailto:CitySalem@SalemSD.com)

PERMIT #

**RESPONSIBLE PARTIES** (Permit issuance and correspondence will be with the applicant.)

<b>Property Owner Name (Applicant)</b>		
<b>Mailing Address</b>	<b>Phone</b>	
	<b>Cell</b>	
<b>City</b>	<b>State</b>	<b>Zip</b>
<b>Email Address</b>		

The undersigned, being desirous of installing new cement within the limits of the City of Salem, South Dakota, hereby makes application for a permit to carry on such work, and represents: That the applicant is the owner of the premises:

That the nature of the work to be done is to:

Install new sidewalk       Replace sidewalk  
 Driveway (includes approach)       Curb & Gutter

The estimated cost of the work to be done is:

\$ \_\_\_\_\_

**PROPERTY INFORMATION**

<b>Property Address or Location</b>		
<b>Parcel #</b>	<b>Lot Dimensions</b>	<b>Approach Width</b>
<b>Legal Description</b>		
<b>Current Zone</b> (please circle) R1 R2 CB GB LI HI NRC	<b>Flood Zone</b> (please circle) YES NO	<b>Type of Lot</b> (please circle) CORNER INTERIOR OTHER

**DESCRIPTION OF PROJECT:**

  
  

**PERMIT CONDITION'S**

1. Construction of all sidewalks, curbing and driveway approaches must meet the guidelines set by City Ordinances, Salem Standard Specifications for Public Improvements and Design Standards for Public Improvements. The city engineer will design and stake the right-a-way at the City's expense.
2. The width of sidewalks shall be not less than four feet and shall conform to the width, grade and cut lines of adjoining sidewalks – meeting standards in Item 1. Location – one-half foot from the property line within the street right-a-way.
3. Curb, gutter and sidewalks at intersections must be constructed to current ADA standards. The City of Salem will pay for the cost of construction or reconstruction of the corners from the sidewalk to curb. Contractor shall provide the City with a W-9, proof of insurance and a detailed invoice(s) for payment.
4. Existing boulevards must be maintained according to City Ordinance.
5. Any proposed sidewalk not conforming to city specifications must be approved by the Salem City Council prior to construction.
6. Call **South Dakota One Call** at 1-800-781-7474. **Give 48-hour notice for all locates.**

PERMIT #

**BUILDING PERMIT FEES**

CONSTRUCTION VALUE	FEE
Construction Values	
\$0 - \$1,000	\$55.00
\$1,001 - \$5,000	\$65.00
\$5,001 - \$20,000	\$75.00
\$20,000 - \$50,000	\$150.00
\$50,001 - \$150,000	\$250.00
\$150,001 & up	\$500.00

**Street Opening:** A Street Excavation Permit is required if you dig into the city street.

Will the project require digging into a street? \_\_\_\_\_

I (we) certify that the information given is correct and true and I (we) agree to do the proposed work in accordance with the provisions of this permit and Municipal Ordinances and design standards of the City of Salem, South Dakota, and will comply with State regulations as required; and that the property owner shall be responsible for determining the boundaries of the property described

\_\_\_\_\_  
SIGNATURE OF APPLICANT(S)

\_\_\_\_\_  
SIGNATURE OF APPLICANT(S)

\_\_\_\_\_  
DATE

<b>Contractor's Name</b>		
<b>Mailing Address</b>	<b>Phone</b>	
	<b>Cell</b>	
<b>City</b>	<b>State</b>	<b>Zip</b>
<b>Email Address</b>		

**TOTAL DUE:** \_\_\_\_\_

**CASH/ CHECK #** \_\_\_\_\_

**PERMIT APPROVED: YES / NO**

<b>COMMENTS:</b>

\_\_\_\_\_  
ADMINISTRATIVE OFFICIAL

\_\_\_\_\_  
DATE

**APPEAL**

Notice of appeal shall be presented to the Authorized official within thirty (30) days after the filing of the decision in the office of the Authorized Official.

I (we) hereby appeal the decision of the Administrative Official in denying a permit for the above use or structure and ask the Board of Adjustment to grant the permit.

\_\_\_\_\_  
SIGNATURE OF APPLICANT(S)

\_\_\_\_\_  
DATE

**REASON FOR APPEAL**


**FOR CITY USE ONLY**

<b>DATE RECEIVED:</b>	<b>HEARING DATE:</b>	<b>TIME:</b>
<b>APPLICANT NOTIFIED:</b>		
<b>ACTION TAKEN:</b>		
<b>COMMENTS:</b>		

\_\_\_\_\_  
CHAIRMAN, BOARD OF ADJUSTMENT

\_\_\_\_\_  
DATE

<b>NOT GRANTED GIVEN REASONS:</b>