

City of Sedgwick, Kansas Application for Building Permit

Permit # _____

Date: _____

NAME OF APPLICANT: _____

Email: _____ Phone: _____

Application is hereby made for a permit to: _____
(Erect, Remodel, Add To, Move, Demolish)

Located at (street address): _____

Legal Description: _____

In accordance with the following description, in conformance with all provisions and law in effect pertaining thereto.

Existing use: _____ Proposed use: _____ Estimated cost: _____

Lot Information:

Street Frontage: _____

Width _____

Depth _____

Area _____

Sanitation Information:

Sewer Private _____ Public _____

Water..... Private _____ Public _____

Building Information:

Width _____

Depth _____

Height _____

Floors (number) _____

Floor Area Sq. Ft.: _____

Total % Lot Coverage:

If residential, number of dwelling units

Basement: Yes ___ No ___ Floor Elevation _____

Setback Information:

	Actual	Required
Front Yard	_____	_____
Side Yard	_____	_____
Rear Yard	_____	_____

Number of Off-Street Parking:

Actual	Required
_____	_____

Comments: _____

I hereby affirm that the above statements are true and correct and agree to comply with all ordinances and law pertaining to and governing the construction, alterations, extensions, or removal of buildings described in this application. I do hereby grant the City's Representative access to the premises to determine compliance with local codes and ordinances.

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The applicant shall be responsible for providing all necessary surveys and information sufficient to insure conformance with all Zoning Regulations. Local Codes and Ordinances. The applicant shall also be responsible for compliance with the City's current adopted Building, Plumbing, Electrical and Mechanical Regulations. Permits when issued, do not nullify any deed restriction validly filed of record. For nonconformance, the designated City Official, may in writing stop or restrict work. The jurisdiction shall have alleged deficiencies inspected within 48 hours by a licensed contractor in the field at the applicant's expense. If construction of any type on the project continues before sited deficiencies are corrected, the designated City Official may revoke any or all permits at the time. This permit shall be effective for one (1) year following issuance date.

Building Permit shall be displayed in a prominent place during construction

Owner or Representative's Signature:

Address:

Phone:

Print Name

FOR OFFICE USE ONLY

ISSUANCE OF BUILDING PERMIT

This building permit is hereby issued to: _____

For the Purpose of: _____

This building permit is Denied by: _____

For the Reasons of: _____

Payment Information

Permit Fee: \$ _____

Inspection Fee: \$ _____

Total Paid: \$ _____

Receipt #: _____

Minimum Pad Elevation Req'd: _____

Plumbing: \$ _____

Electric: \$ _____

Mechanical: \$ _____

Sewer Tap: \$ _____

Meter ¾", 1", or 2": _____

By: _____

Date: _____

Zoning Administrator Signature

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Please provide the structures and/or accessory buildings to the following diagram or attach a diagram/blue prints to this permit.

Length of lot: _____

Width of lot: _____

Scale = _____

