**CITY OF ALMENA**

**APPLICATION FOR BUILDING PERMIT**

Building permit must be approved prior to commencement of work. You are required to get all services located prior to digging by calling 811 (Dig Safe). All roofing contractors are required by law to be registered with the Kansas Attorney General’s Office. For more information visit *ag.ks.gov/licensing/roofing-registration*.

**Date of Application**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­\_\_  **Estimated Cost** \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Owner** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Phone number** \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Applicant, if not owner** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Phone number** \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Property Address**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­\_\_\_\_\_\_\_\_\_

**Mailing Address**:­­­­­­ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Property Type:** Residential \_\_\_\_\_\_\_\_ Commercial\_\_\_\_\_\_\_\_\_

**Type of Work:** New Construction \_\_\_\_ Addition \_\_\_\_ Remodel\_\_\_ Demolition\_\_\_

**Type of Construction:** Masonry\_\_\_ Concrete\_\_\_ Frame \_\_\_ Metal\_\_\_ Other (explain)\_\_\_\_\_\_\_\_

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**Structure:** Dwelling\_\_\_ Accessory Use Building\_\_\_ Roof\_\_\_\_

**Roofing Contractor’s License #**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Contractor**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Phone number**: ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date work to begin**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Estimated Completion Date** \_\_\_\_\_\_\_\_\_\_\_\_

**Sewage Disposal:** Public Sewer \_\_\_\_\_\_\_ Septic Tank \_\_\_\_\_\_

-If septic tank, distance to nearest public sewer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Is property located in designated Floodway?** Yes\_\_\_\_ No \_\_\_\_ Unknown \_\_\_\_\_\_\_\_\_\_

Legal Description for the land where the structure is to be erected constructed, extended, remodeled, or modified: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Detailed description of the structure to be erected, constructed, extended, remodeled, or modified: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­\_

**Dimensions**: Length \_\_\_\_\_\_\_\_ Width \_\_\_\_\_\_\_ Height \_\_\_\_\_\_\_ Depth \_\_\_\_\_\_

**Total Square Feet:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Number of Stories** \_\_\_\_\_\_\_\_\_\_\_

**Setbacks from property lines in feet from:** Front \_\_\_\_\_ Side \_\_\_\_\_ Side \_\_\_\_\_ Rear \_\_\_\_\_\_

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I hereby certify that the above or attached plot shows the true relationship between the buildingto be constructed and the lot lines and existing buildings. I hereby agree and bind myself to construct said builing in accordance with all requirements of the Uniform Building Codes and other ordinaces of the City of Almena, Kansas.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature Date

OFFICE USE ONLY

Fee (if applicable) $\_\_\_\_\_\_\_\_\_\_ Date approved \_\_\_\_\_\_\_\_\_\_\_ Issued by & Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_