

VALLEY FALLS PLANNING AND ZONING COMMISSION

Valley Falls, Kansas 66088

BUILDING PERMIT APPLICATION

IMPORTANT - Complete ALL items. Mark boxes where Applicable

I. Legal Description of Land				Subdivision		Lot	Block		
II. TYPE AND COST OF BUILDING - All applicants complete Parts A - D									
A. TYPE OF IMPROVEMENT				D. PROPOSED USE					
1	<input type="checkbox"/>	New Building	Residential		Non-Residential				
2	<input type="checkbox"/>	Addition	12	<input type="checkbox"/>	One Family	18	<input type="checkbox"/>	Amusement, Recreation	
3	<input type="checkbox"/>	Alteration (See 2 above)	13	<input type="checkbox"/>	Two or more family	19	<input type="checkbox"/>	Church, other Religious	
4	<input type="checkbox"/>	Repair, replacement		<input type="checkbox"/>	Enter no of Units _____	20	<input type="checkbox"/>	Industrial	
5	<input type="checkbox"/>	Mobile Home	14	<input type="checkbox"/>	Transient, hotel, motel	21	<input type="checkbox"/>	Grain Bin	
6	<input type="checkbox"/>	Moving (Relocation)		<input type="checkbox"/>	Enter no of Units _____	22	<input type="checkbox"/>	Service Station, Repair	
7	<input type="checkbox"/>	Foundation only	15	<input type="checkbox"/>	Garage	23	<input type="checkbox"/>	Silo	
B. Ownership				16	<input type="checkbox"/>	Carport	24	<input type="checkbox"/>	Office, Bank
8	<input type="checkbox"/>	Private (Individual, Corp, nonprofit institution, etc.)	17	<input type="checkbox"/>	Other - Specify _____	25	<input type="checkbox"/>	Barn	
9	<input type="checkbox"/>	Public (Fed, St, or Local Gov.)				26	<input type="checkbox"/>	Storage Building	
						27	<input type="checkbox"/>	Store - Retail	
						28	<input type="checkbox"/>	Tanks, Towers	
						29	<input type="checkbox"/>	Septic Only	
C. COST				Nonresidential - Describe in detail proposed use of building. If use of building is being changed, enter proposed date.					
10		Cost of improvement.....	\$	_____	_____ _____ _____ _____ _____				
		To be installed but not included in the above cost.							
	a.	Electrical	\$	_____					
	b.	Plumbing	\$	_____					
	c.	Heating, air conditioning	\$	_____					
	d.	Other (elevator, etc.)	\$	_____					
11		TOTAL COST OF IMPROVEMENT	\$	_____					
III. SELECTED CHARACTERISTICS OF BUILDING - For new buildings and additions, complete part E-L; for wrecking, complete only Part J; for all others skip to IV.									
E. PRINCIPAL TYPE OF FRAME			G. TYPE OF SEWAGE DISPOSAL			J. DIMENSIONS			
30	<input type="checkbox"/>	Masonry (Wall bearing)	40	<input type="checkbox"/>	Public or Private Comp	48	<input type="checkbox"/>	# of stories	
31	<input type="checkbox"/>	Wood Frame	41	<input type="checkbox"/>	Individual (Septic, lagoon)	49	<input type="checkbox"/>	Total Sq Ft of floor area, all floors, based on exterior dimensions.	
32	<input type="checkbox"/>	Structural	H. TYPE OF WATER SUPPLY			50	<input type="checkbox"/>	Total Acreage or lots	
33	<input type="checkbox"/>	Reinforced Concrete	42	<input type="checkbox"/>	Public, RWD No. _____	K. # OF OFF-STREET PARKING STALLS			
34	<input type="checkbox"/>	Pole Other - Specify _____	43	<input type="checkbox"/>	Individual (well, cistern)	51	<input type="checkbox"/>	Enclosed	
F. PRINCIPAL TYPE OF HEATING FUEL			I. TYPE OF MECHANICAL			52	<input type="checkbox"/>	Outdoors	
35	<input type="checkbox"/>	Gas	Will there be central air cond.?			L. RESIDENTIAL BUILDINGS ONLY			
36	<input type="checkbox"/>	Oil	44	<input type="checkbox"/>	Yes	45	<input type="checkbox"/>	No	
37	<input type="checkbox"/>	Electricity	Will there be an elevator?			53	<input type="checkbox"/>	Number of Bedrooms....	
38	<input type="checkbox"/>	Coal	46	<input type="checkbox"/>	Yes	47	<input type="checkbox"/>	No	
39	<input type="checkbox"/>	Wood Other - Specify _____				54	<input type="checkbox"/>	Number of bathrooms Full	
							<input type="checkbox"/>	Partial	
IV. IDENTIFICATION - To be completed by all applicants.									
Name		Mailing Address - Number, Street, City, and State				ZIP code	Telephone No.		
1	X								
Owner									
2	X								
Contractor									
3	X								
Architect									
Signature of the Applicant - The owner of this building and the undersigned agree to conform to all applicable law.									
X				Address		Application Date			
DO NOT WRITE IN THIS SPACE - FOR OFFICE USE									
Approved by			Permit Fee		Date Permit Issued		Permit number		

Draw plot plan on the back of this application showing size and location of building on plot, also show source of water and sewage disposal.

STREET _____

Front Property Line

Side
Lot
Line

Side
Lot
Line

Rear Property Line