

VALLEY FALLS PLANNING AND ZONING COMMISSION

Valley Falls, Kansas 66088

BUILDING PERMIT APPLICATION

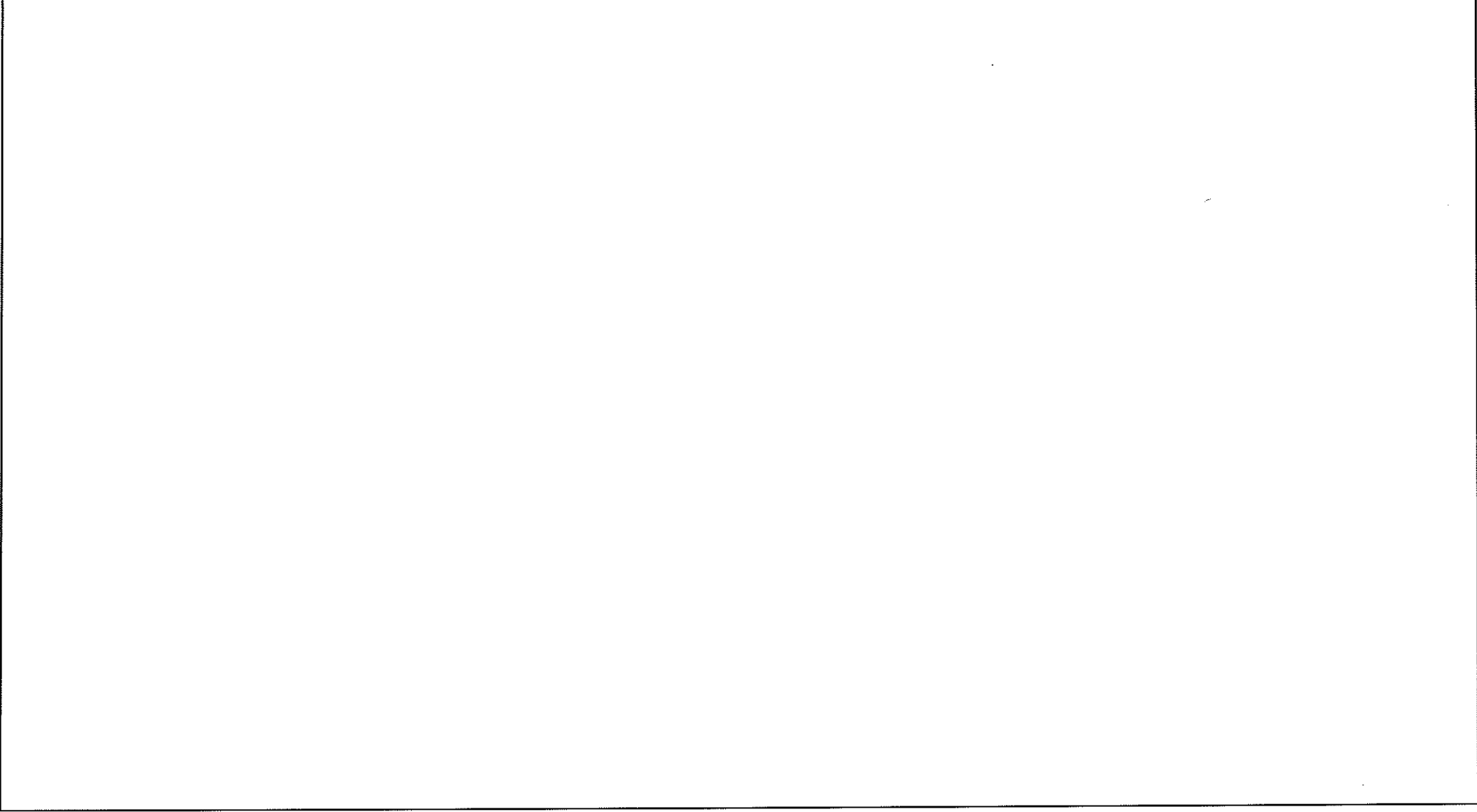
IMPORTANT - Complete ALL items. Mark boxes where Applicable

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	New Building	Residential			
2	Addition	12	Non-Residential		
3	Alteration (See 2 above)	13	18	Amusement, Recreation	
4	Repair, replacement	14	19	Church, other Religious	
5	Mobile Home	15	20	Industrial	
6	Moving (Relocation)	16	21	Grain Bin	
7	Foundation only	17	22	Service Station, Repair	
			23	Silo	
			24	Office, Bank	
			25	Barn	
			26	Storage Building	
			27	Store - Retail	
			28	Tanks, Towers	
			29	Septic Only	
B. Ownership					
8	<input type="checkbox"/> Private (Individual, Corp, nonprofit institution, etc.)				
9	<input type="checkbox"/> Public (Fed, St, or Local Gov.)				
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 # of stories _____	
31	<input type="checkbox"/> Wood Frame	41	<input type="checkbox"/> Individual (Septic, lagoon)	49 Total Sq Ft of floor area, all floors, based on exterior dimensions. _____	
32	<input type="checkbox"/> Structural	H. TYPE OF WATER SUPPLY		50 Total Acreage or lots _____	
33	<input type="checkbox"/> Reinforced Concrete	42	Public, RWD No. _____	K. # OF OFF-STREET PARKING STALLS	
34	<input type="checkbox"/> Pole	43	Individual (well, cistern)	51 Enclosed _____	52 Outdoors _____
	Other - Specify _____	I. TYPE OF MECHANICAL		L. RESIDENTIAL BUILDINGS ONLY	
F. PRINCIPAL TYPE OF HEATING FUEL		Will there be central air cond.?		53 Number of Bedrooms....	
35	<input type="checkbox"/> Gas	44	<input type="checkbox"/> Yes <input type="checkbox"/> No	54 Number of bathrooms	
36	<input type="checkbox"/> Oil	46	<input type="checkbox"/> Yes <input type="checkbox"/> No	Full	
37	<input type="checkbox"/> Electricity	Will there be an elevator?		Partial	
38	<input type="checkbox"/> Coal	46 <input type="checkbox"/> Yes <input type="checkbox"/> No			
39	<input type="checkbox"/> Wood	47 <input type="checkbox"/> No			
	Other - Specify _____				
IV. IDENTIFICATION - To be completed by all applicants.					
Name		Mailing Address - Number, Street, City, and State		ZIP code	Telephone No.
1	<input checked="" type="checkbox"/> Owner				
2	<input checked="" type="checkbox"/> Contractor				
3	<input checked="" type="checkbox"/> 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



Rear Property Line

Side
Lot
Line

Side
Lot
Line