

BUILDING PERMIT APPLICATION

CITY OF LAUREL

101 W. 2ND ST. BOX 248 LAUREL, NE 68745

Ph: 256-3112

Fax: 256-9120

Email: laurelca@huntel.net

Please fill out this form entirely.

Forms not completed will be returned to the applicant.

Legal Description

Zoning District (circle one)

AG R-1 R-2 R-3 C-1 C-2 I-1

Lot Size ft. X ft.

Yard set backs Front Side Side Rear

Owner Telephone Number

Street Address or Job Location City

Lot Number Subdivision:

Applicant:

Address:

City State Zip

Home Phone No: _____

Cell No: _____

Building Contractor:

Office No: Cell No:

Fax No: _____

Electrical Contractor:

Office No: Cell No:

Fax No: _____

Mechanical Contractor:

Office No: Cell No:

Fax No: _____

Plumbing Contractor:

Office No: Cell No:

Fax No: _____

Date: _____

Residential New Build Living Area: (Sq. Ft.)

Garage Area: Sq Ft.

Residential New Build: Garages, Sheds, Storage Buildings, etc.

Building Area: (Sq. Ft.)

Residential Additions: Living Area: (Sq. Ft.)

Porch Length ft. Width ft.

Deck Length ft. Width ft.

Patio Length ft. Width ft.

Fences Length ft. Width ft.

Driveways Length ft. Width ft.

Multiple Dwellings - Building Sq. Ft.

Number of Units: _____

Commercial - Building Sq. Ft.

Industrial - Building Sq. Ft.

Estimated Value of Construction \$ _____ .00

Permit Fee:

Residential New Build \$25.00

Residential Additions \$10.00

Multiple Dwellings \$30.00

Commercial \$50.00

Industrial \$50.00

The City of Laurel provides the service of locating apparent property corners a fee of \$10.00 but does not guarantee that these are true corners.

The city recommends that you hire licensed surveyor.

Do you want the City to locate property corners? Yes No

TOTAL AMOUNT DUE: \$ _____

In consideration of the issuance of this permit, the applicant hereby certifies that the above and attached statements are true and correct, and hereby agrees to comply with the zoning regulations and other regulations which are in effect. If in violation of regulations or through misrepresentation of facts, this building permit then becomes null and void and applicant may be subject to the penalties established.

Date _____

Contractor Signature

Homeowner Signature

This permit application is:

Approved

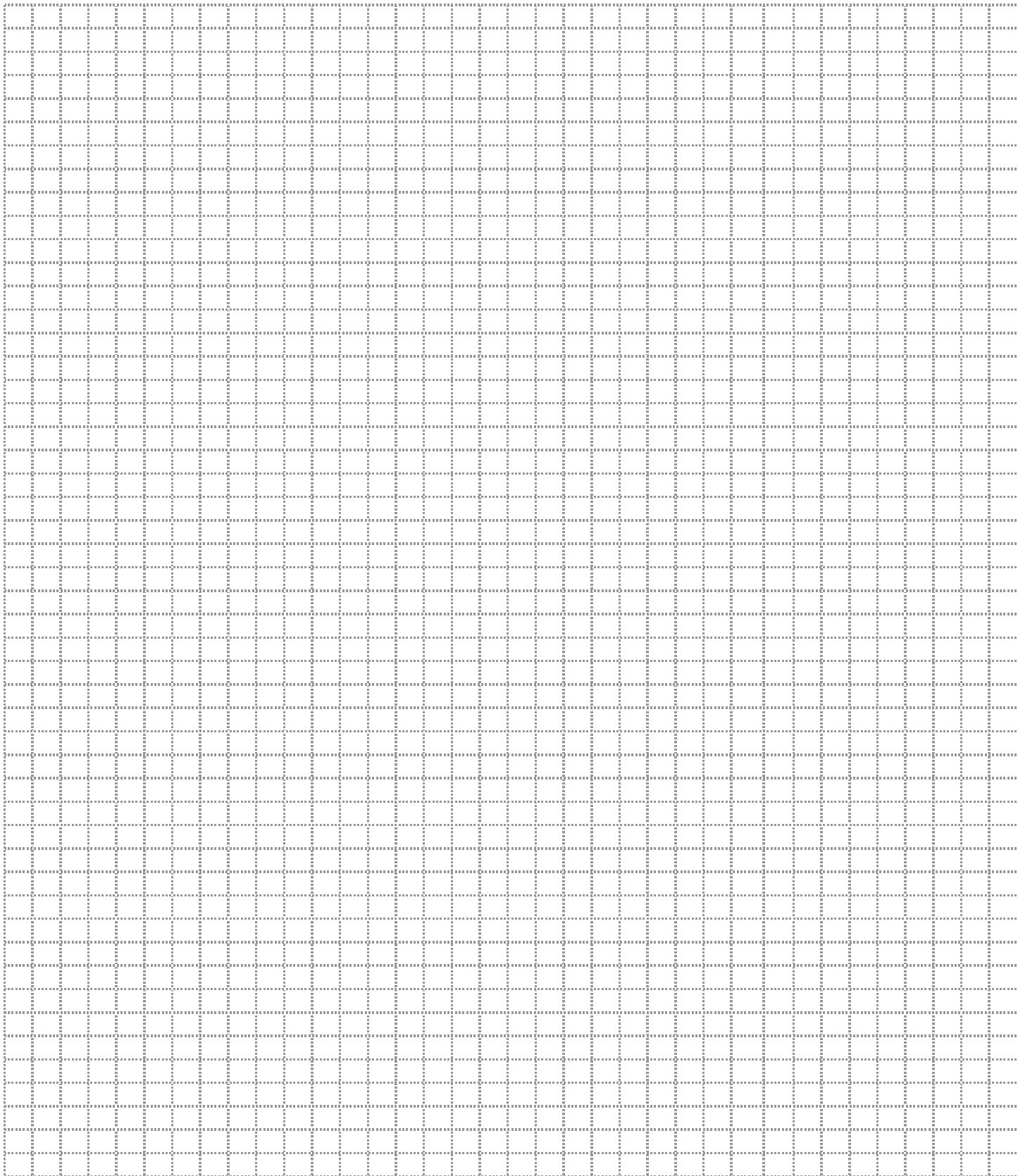
Disapproved

Approved Conditionally according to the facts stated above by the owner.

Date: _____ Zoning Administrator _____

PROJECTS MUST HAVE SETBACKS AND DIMENSIONS DRAWN ON THE BACK OF THIS APPLICATION OR A BLUEPRINT

ATTACHED. PERMITS THAT ARE NOT COMPLETED PROPERLY WILL BE RETURNED TO THE APPLICANT.



Send to: City of Laurel, PO Box 248, Laurel, NE 68745

Fax to: 256-9120

PERMITS ARE REVIEWED AND APPROVED BY THE PLANNING COMMISSION EVERY 1ST THURSDAY OF THE MONTH.