

Residential Building Permit Application

**City of Great Bend
Building Inspections
1205 Williams Street
Great Bend, Kansas 67530
(620) 793-4106
(620) 793-4146**

Required Documents:
Site Plan
Building Drawings
Window Schedule
Truss Package/Bracing



Application Date _____

2006 IBC
2006 IFC
2005 NEC
2006 UMC
2006 UPC

Property Information

Street Address	City, State	Zip
Zoning		

Owner Information

First Name	Last Name	Phone	
Street Address	City	State	Zip

Contractor Information

	Name	Phone Number
Applicant		
General	State Roofer #	
Concrete/Foundation		
Structural/Framing		
Roofing	State Roofer #	
Electrical		
Plumbing		
Mechanical		
Architect/Engineer		

Please see reverse side

Construction Information

Type of Improvement <input type="checkbox"/> New Single Family Dwelling <input type="checkbox"/> New Duplex <input type="checkbox"/> Detached Structure/Garage <input type="checkbox"/> Addition <input type="checkbox"/> Remodel <input type="checkbox"/> Egress Windows <input type="checkbox"/> Deck <input type="checkbox"/> Fencing <input type="checkbox"/> Swimming Pool <input type="checkbox"/> Foundation Repair <input type="checkbox"/> Demolition <input type="checkbox"/> Other	Floor Area (in square feet) <input type="checkbox"/> First floor <input type="checkbox"/> Second floor <input type="checkbox"/> Basement (finished) <input type="checkbox"/> Basement (unfinished) <input type="checkbox"/> Garage <input type="checkbox"/> Total Square Foot <input type="checkbox"/> Accessory Structures <input type="checkbox"/> Crawl Space	<input type="checkbox"/> # of Bedrooms <input type="checkbox"/> # of Full Baths <input type="checkbox"/> # of Half Baths <input type="checkbox"/> # of Living Rooms <input type="checkbox"/> # of Dining Rooms <input type="checkbox"/> # of Kitchens Fire Places <input type="checkbox"/> # Gas Fire Places <input type="checkbox"/> # Wood Burning
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Commencement Date	Expected Completion Date	Estimated Cost of Project \$
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Project Description

Neighborhood Revitalization Plan

This program is designed to give property owners the opportunity to receive a five or ten year incremental rebate on the additional property taxes that may be incurred as a result of constructing new buildings or making improvements to existing ones. Certain eligibility requirements and deadlines must be met to qualify for the plan. Building Inspections can provide more information regarding this program.

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent. I also certify that the information provided is correct and that I will comply with all zoning regulations, as well as all City, State and Federal requirements. A permit issued upon false statement of any fact, which is material to the issuance of a permit, shall void said permit. Permits and/or Certificates of Occupancy, when issued, DO NOT NULLIFY ANY DEED RESTRICTIONS OR EASEMENTS VALIDLY FILED OF RECORD. In addition, I agree to install appropriate erosion control measures in order to avoid dirt, sand and other material from accumulating within public street right-of-ways. I also agree that if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

Signature of Applicant

Date

Office Use Only

Permit Fee \$ _____

Permit # _____

Permit Issue Date _____