CITY OF CARBONDALE, KANSAS

Fee	:				
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234 Main P.O. Box 70

Carbondale, KS 66414 Phone: 785.836.7108

COMMERCIAL & MULTI-FAMILY BUILDING PERMIT APPLICATION

Name	(type or print)	Address	Phone			
			Zoned as			
ocated in		Addition	Lots are	ft wide.		
EGAL DESCRIPTION OF PF r available at the Osa		=	-			
wner of Record: Name	(type or print)	Address	Phone			
eneral Contractor:						
	Name (type or pr	int) Address		Phone		
rchitect or Designer:	Name (type or pr	int) Address		Phone		
LASS OF WORK	Danata	7 44: 1:	7]tauatian/Damadal			
OtherNew	Repair		_Alteration/Remodel			

NOTE: Property owner or applicant is responsible for submitting accurate information. The City does

NOT certify boundary lines. Applications are approved based on measurements provided.

Page 1 of 4

Value of Project	Square Footage
Will there be electrical or plumbing work?	Electrical Plumbing
Please indicate Contractor Name (type or prin	t) Address Phone
Is property located in a floodplain area? IF YES, please obtain and complete the Floodplain	
Will a new water tap be required?	YesNo
Will a new sewer tap be required?	No
Will installation of utility lines require cross nearest point to hook on?	ing a street or alley to reach the YesNo
If yes, complete required forms and pay fees. For	orms are at City Hall.
SETBACKS: Is location on a corner lot? (If yes, the front property line setback is requ	YesNo ired on both streets)
feet from the front property line (25 feet from side yard property line (See feet from side yard property line (See feet from back property line (10 feet f	Article 5) Article 5)
Estimated starting date:	Completion date:
IMPORTANT: Attach a separate sheet showing structure all setbacks, public or private easement applicable). The property owner or agent is responded all dimensions given, as well as any legal sur	ets, height of structure, and parking (if consible for the accuracy and verification
A stamped site plan, permits and spec book are r Site Plan Attached Yes	
Applicant Ple	ase Read
I hereby certify that I have read and examined the true and correct. I hereby certify that I have the his/her agent in applying for and obtaining this All provisions of laws and ordinances governing whether specified herein or not. The granting of authority to violate or cancel the provisions of construction or the performance of construction.	een authorized by the owner to act as permit prior to work being initiated. this type of work will be complied with, a permit does not presume to give any other state or local law regulating
Signature of Applicant	Date

NOTE: This application (if approved) expires one year after date of issuance unless the project is started within six months of approval.

IF APPLICATION IS NOT APPROVED:

- . You have the right to file a request for a hearing before the Board of Zoning Appeals.
- . See Article 12, or contact the City Clerk's Office for procedure.
- . Request must be made within thirty (30) days of being disapproved.

	~ BELOW	SECTION FOR CITY	USE ONLY ~			
Zoning	Occupancy	Floodplain	ADA			
Type of Construction	on	Sprinklers	Required			
		_Approved	_Denied			
Comments of Zoning Administrator:						
Date:	Signed:	Zoning Adm	inistrator			
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Page 3 of 4

COMMERCIAL/RESIDENTIAL BUILDING PERMIT DRAWING CHECKLIST

Submission Requirements: The site plan shall include the following data and details which are found relevant to the proposal the applicant shall make notations explaining the reasons for any omissions.

	Yes	No
A. Name of project, address, date, north arrow, and scale of plan.		
B. All existing lot lines, easements, and rights of way.		
C. The location and use of all existing and proposed structures within the property. Include all dimensions of floor area, and show all exterior entrances, and all anticipated future additions or alterations.		
D. The location of all present and proposed public and private ways, parking areas, driveways, sidewalks, curbs, and fences.		
E. The location of all present and proposed utility systems: 1. Sewage system;		
2. Water supply system.		

Page 4 of 4