

ZONING CERTIFICATE APPLICATION

TO

THE CITY OF GARNETT, KANSAS 66032-0230

APPLICATION NO. _____

DATE: _____

(TO BE FILLED IN BY APPLICANT)

I, _____ of _____,
(Print Full Name) (Give Full Address) (Phone No.)

hereby make application to the City of Garnett for a Zoning Certificate as required by Ordinance No. 3059. I understand that I must submit all plans, information, plats and the required fee, as required herein, with this application before the application will be accepted for consideration. I also understand that my application must be acted upon within thirty (30) days, unless I consent to an extension of time. A Zoning Certificate shall become null and void six (6) months after the date on which it is issued, unless within such six-month period construction, building, moving, remodeling or reconstruction of a structure is commenced or a use is commenced.

Signature of Applicant

Please provide the following information:

TYPE OF STRUCTURE/PROJECT: _____

_____ Manufactured Home - Constructed on or after July 13, 1994

_____ Manufactured Home; Residential Design - appearance when installed of an on-site, conventionally built home

_____ Modular Home (Dream Home) _____ Stick Built Home

Construction site address if different from above address: _____

Call BEFORE you dig
1-800-344-7233
STATEWIDE (DIG SAFE)
687-2470
WICHITA

ITEMS TO BE SUBMITTED WITH APPLICATION:

1. A drawing that contains the following information:
 - (a) the actual shape and dimensions of the lot to be built on or to be changed in its use, in whole or in part;
 - (b) the exact location, size and height of any building or structure to be erected or altered;
 - (c) in case of a proposed new building or structure as would substantially alter its appearance, drawings or sketches showing the front, side and rear elevations of the proposed building or structure, or of the structure as it will appear after work for which permit is sought shall have been completed;
 - (d) the existing and intended use of each building or structure or part thereof.

SITE SKETCH NEEDS TO BE ATTACHED

2. Permit fee structure:

	FEE
(a) For a residential handicap ramp a permit is required but not a fee.	00
(b) Fence, pool, dog pen, decks and residential storage buildings. Flat work, driveways etc.	\$10.00
(c) Commercial storage buildings.	25.00
Residential remodel	50.00
(d) One and Two family dwellings	50.00
Commercial remodel	100.00
(e) Multi-family dwellings and New Commercial and Industrial remodel.	100.00
(f) New Industrial	200.00

APPLICATION FOR PLAN EXAMINATION AND BUILDING PERMIT

IMPORTANT — Applicant to complete all items in sections: I, II, III, IV, and IX.

I. LOCATION OF BUILDING	AT (LOCATION) _____	(NO.)	(STREET)		ZONING DISTRICT _____
	BETWEEN _____	(CROSS STREET)	AND _____	(CROSS STREET)	
	SUBDIVISION _____	LOT _____	BLOCK _____	LOT SIZE _____	

II. TYPE AND COST OF BUILDING — All applicants complete Parts A - D

<p>A. TYPE OF IMPROVEMENT</p> <p>1 <input type="checkbox"/> New building.</p> <p>2 <input type="checkbox"/> Addition (If residential, enter number of new housing units added, if any, in Part D, 13)</p> <p>3 <input type="checkbox"/> Alteration (See 2 above)</p> <p>4 <input type="checkbox"/> Repair, replacement</p> <p>5 <input type="checkbox"/> Wrecking (If multifamily residential, enter number of units in building in Part D, 13)</p> <p>6 <input type="checkbox"/> Moving (relocation)</p> <p>7 <input type="checkbox"/> Foundation only</p> <p>8 <input type="checkbox"/> Other _____</p>	<p>D. PROPOSED USE — For "Wrecking" most recent use</p> <table style="width: 100%;"> <tr> <td style="width: 50%;"> <p>Residential</p> <p>13 <input type="checkbox"/> One family</p> <p>14 <input type="checkbox"/> Two or more family — Enter number of units _____</p> <p>15 <input type="checkbox"/> Transient hotel, motel, or dormitory — Enter number of units _____</p> <p>16 <input type="checkbox"/> Garage</p> <p>17 <input type="checkbox"/> Carport</p> <p>18 <input type="checkbox"/> Other - Specify _____</p> </td> <td style="width: 50%;"> <p>Nonresidential</p> <p>19 <input type="checkbox"/> Amusement, recreational</p> <p>20 <input type="checkbox"/> Church, other religious</p> <p>21 <input type="checkbox"/> Industrial</p> <p>22 <input type="checkbox"/> Parking garage</p> <p>23 <input type="checkbox"/> Service station, repair garage</p> <p>24 <input type="checkbox"/> Hospital, institutional</p> <p>25 <input type="checkbox"/> Office, bank, professional</p> <p>26 <input type="checkbox"/> Public utility</p> <p>27 <input type="checkbox"/> School, library, other educational</p> <p>28 <input type="checkbox"/> Stores, mercantile</p> <p>29 <input type="checkbox"/> Tanks, towers</p> <p>30 <input type="checkbox"/> Other - Specify _____</p> </td> </tr> </table>	<p>Residential</p> <p>13 <input type="checkbox"/> One family</p> <p>14 <input type="checkbox"/> Two or more family — Enter number of units _____</p> <p>15 <input type="checkbox"/> Transient hotel, motel, or dormitory — Enter number of units _____</p> <p>16 <input type="checkbox"/> Garage</p> <p>17 <input type="checkbox"/> Carport</p> <p>18 <input type="checkbox"/> Other - Specify _____</p>	<p>Nonresidential</p> <p>19 <input type="checkbox"/> Amusement, recreational</p> <p>20 <input type="checkbox"/> Church, other religious</p> <p>21 <input type="checkbox"/> Industrial</p> <p>22 <input type="checkbox"/> Parking garage</p> <p>23 <input type="checkbox"/> Service station, repair garage</p> <p>24 <input type="checkbox"/> Hospital, institutional</p> <p>25 <input type="checkbox"/> Office, bank, professional</p> <p>26 <input type="checkbox"/> Public utility</p> <p>27 <input type="checkbox"/> School, library, other educational</p> <p>28 <input type="checkbox"/> Stores, mercantile</p> <p>29 <input type="checkbox"/> Tanks, towers</p> <p>30 <input type="checkbox"/> Other - Specify _____</p>
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<p>B. OWNERSHIP</p> <p>9 <input type="checkbox"/> Private (individual, corporation, nonprofit institution, etc.)</p> <p>10 <input type="checkbox"/> Public (Federal, State, or local government)</p>	<p>C. COST</p> <p>11 Cost of improvement _____ \$</p> <p style="text-align: center;"><i>To be installed but not included in the above cost</i></p> <p>a. Electrical _____</p> <p>b. Plumbing _____</p> <p>c. Heating, air conditioning _____</p> <p>d. Other (elevator, etc.) _____</p> <p>12 TOTAL COST OF IMPROVEMENT _____ \$</p>	<p style="text-align: center;">(Omit cents)</p> <p>Nonresidential — Describe in detail proposed use of buildings, e.g., food processing plant, machine shop, laundry building at hospital, elementary school, secondary school, college, parochial school, parking garage for department store, rental office building, office building at industrial plant. If use of existing building is being changed, enter proposed use.</p> <p>_____</p> <p>_____</p> <p>_____</p>
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III. SELECTED CHARACTERISTICS OF BUILDING — For new buildings and additions, complete Parts E - L; for wrecking, complete only Part J, for all others skip to IV.

<p>E. PRINCIPAL TYPE OF FRAME</p> <p>31 <input type="checkbox"/> Masonry (wall bearing)</p> <p>32 <input type="checkbox"/> Wood frame</p> <p>33 <input type="checkbox"/> Structural steel</p> <p>34 <input type="checkbox"/> Reinforced concrete</p> <p>35 <input type="checkbox"/> Other — Specify _____</p>	<p>G. TYPE OF SEWAGE DISPOSAL</p> <p>41 <input type="checkbox"/> Public or private company</p> <p>42 <input type="checkbox"/> Private (septic tank, etc.)</p>	<p>J. DIMENSIONS</p> <p>49 Number of stories _____</p> <p>50 Total square feet of floor area, all floors, based on exterior dimensions _____</p> <p>51 Total land area, sq. ft. _____</p>	
<p>F. PRINCIPAL TYPE OF HEATING FUEL</p> <p>36 <input type="checkbox"/> Gas</p> <p>37 <input type="checkbox"/> Oil</p> <p>38 <input type="checkbox"/> Electricity</p> <p>39 <input type="checkbox"/> Coal</p> <p>40 <input type="checkbox"/> Other — Specify _____</p>	<p>H. TYPE OF WATER SUPPLY</p> <p>43 <input type="checkbox"/> Public or private company</p> <p>44 <input type="checkbox"/> Private (well, cistern)</p>	<p>K. NUMBER OF OFF-STREET PARKING SPACES</p> <p>52 Enclosed _____</p> <p>53 Outdoors _____</p>	<p>L. RESIDENTIAL BUILDINGS ONLY</p> <p>54 Number of bedrooms _____</p> <p>55 Number of bathrooms { Full _____ Partial _____</p>
<p>I. TYPE OF MECHANICAL</p> <p>Will there be central air conditioning?</p> <p>45 <input type="checkbox"/> Yes 46 <input type="checkbox"/> No</p> <p>Will there be an elevator?</p> <p>47 <input type="checkbox"/> Yes 48 <input type="checkbox"/> No</p>			

NO. SHEET

IDENTIFICATION — To be completed by all applicants

Name	Mailing address - Number, street, city and State	ZIP code	Tel. No.
1. Owner or Lessee			
2. Contractor		Builder's License No.	
3. Architect or Engineer			

I hereby certify 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 and we agree to conform to all applicable laws of this jurisdiction.

Signature of applicant	Address	Application date
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DO NOT WRITE BELOW THIS LINE

V. PLAN REVIEW RECORD — For office use

Plans Review Required	Check	Plan Review Fee	Date Plans Started	By	Date Plans Approved	By	Notes
BUILDING		\$					
PLUMBING		\$					
MECHANICAL		\$					
ELECTRICAL		\$					
OTHER _____		\$					

VI. ADDITIONAL PERMITS REQUIRED OR OTHER JURISDICTION APPROVALS

Permit or Approval	Check	Date Obtained	Number	By	Permit or Approval	Check	Date Obtained	Number	By
BOILER					PLUMBING				
CURB OR SIDEWALK CUT					ROOFING				
ELEVATOR					SEWER				
ELECTRICAL					SIGN OR BILLBOARD				
FURNACE					STREET GRADES				
GRADING					USE OF PUBLIC AREAS				
OIL BURNER					WRECKING				
OTHER _____					OTHER _____				

VII. VALIDATION

Building Permit number _____

Building Permit issued _____, 19 _____

Building Permit Fee \$ _____

Certificate of Occupancy \$ _____

Drain Tile \$ _____

Plan Review Fee \$ _____

Approved by: _____

TITLE