

BUILDING PERMIT APPLICATION

CITY OF LAUREL

302 E. 2ND ST. BOX 248 LAUREL, NE 68745

Ph: 402-256-3112

Fax: 402-256-9120

Email: laurelca@laurelne.com

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.
Applicant:	
Address of Project:	
Home Phone No:	
Cell Phone 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:	

Project setbacks			
Front	Rear	Side	Side
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: Accessory Building: 10'x12' & Under - \$25.00, Over - \$75.00

*Residential New Build \$150.00	*Special Use Permit - \$100.00
*Residential Additions \$75.00	*Variance - \$100.00
*Multiple Dwellings \$100.00	*Fence, Driveway, Sidewalk, Sign, Porch, Deck, Patio - \$30.00
*New or Addition - Commercial, Institutional or Industrial - \$200.00	*Lot Splits - \$200.00
*Concrete Parking Lot - \$200.00	*Garage - \$75.00

The City of Laurel can measure or locate approximate property corners or pins for a fee of **\$10.00**. The applicant hereby agrees to not hold the City or the City employees liable for any inaccuracies locating pins or lot corners. Accurate location of lot corners shall be performed by a licensed surveyor.

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

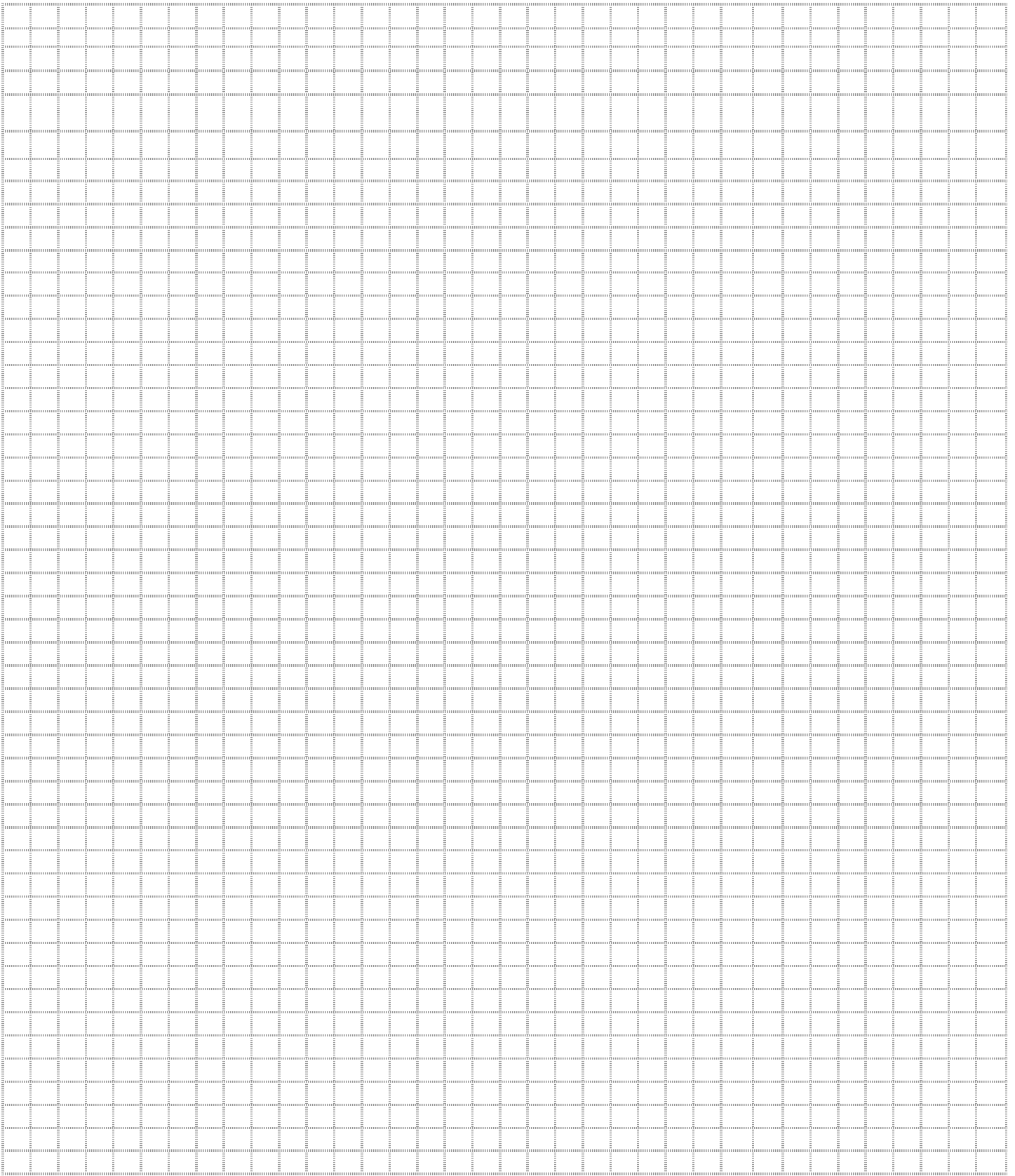
TOTAL Permit Fee: \$ _____

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.

This permit application is: Approved Disapproved according to the facts stated above by the owner.
 Approved Conditionally

Date: _____ Zoning Administrator _____

PROJECTS MUST HAVE SETBACKS AND DIMENSIONS DRAWN ON THE BACK OF THIS APPLICATION OR A BLUEPRINT OF THE PROJECT 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: 402-256-9120

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

FORM 22

Company/Contractor Name: _____

Business Address: _____

State: _____ Zip Code: _____

Legal Entity: Sole Proprietor Partnership LLC
Corporation Other

Federal ID # _____

Insurance Company: _____

Are you Bonded: Yes No

Type of Construction you will be performing

Certificate of insurance will need to be provided