



RESIDENTIAL BUILDING PERMIT APPLICATION

FOR PLAN EXAMINATION AND BUILDING PERMIT

CITY OF LA VISTA,

8116 Park View Blvd., La Vista, NE 68128-2198 Phone: 402-593-6400

www.cityoflavista.org

I. LOCATION OF BUILDING AND PERMITS REQUIRED

Project Address: _____ Zoning District _____

Subdivision _____ Lot # _____ Lot Size _____

Is this a rental property? Yes No

Applicant _____

(Print Name)

(Full Address)

Permit	Check <input type="checkbox"/>	Number	Date	Fee Paid	Name of Sub-Contractor
Building Permit					
Electrical					
Curb Cut/Approach					
Sidewalk					
Sewer Hook Up					
Plumbing					
Mechanical					
Other					
Certificate of Occupancy					XXXXXXXXXXXXXXXXXXXX
TOTAL PAID					

II. IDENTIFICATION (to be completed by ALL APPLICANTS)

Owner or Lessee _____

Address _____

Number and Street

City

State

Zip

Phone

Contractor _____

Address _____

Number and Street

City

State

Zip

Phone

Architect or Engineer _____

Address _____

Number and Street

City

State

Zip

Phone

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. I agree to conform to all applicable laws of this jurisdiction. As this permit application pertains to new construction, the undersigned also hereby gives permission to the building inspector and his/her lawfully appointed assistant(s) for entry upon the premises described above for the purpose of monitoring the construction for which the building permit was granted. Furthermore, the undersigned grants rights of entry to the property to representatives of the Sarpy County Assessor's Office for the purpose of obtaining information necessary to determine the proper valuation of the premises for property tax purposes.

Signature of Applicant

Complete Address/City/State/Zip

Date

Reviewed by _____ Approval Date _____

Building Inspector

III. DESCRIPTION

A. Type of Improvement

Size of Structure

- 1. _____ New building
- 2. _____ Addition
- 3. _____ Improvement
- 4. _____ Repair – Replacement

Length _____ Width _____

Square Footage _____

B. Ownership

- 5. _____ Private (Individual, Corporation, Non-Profit Institution, Etc.)
- 6. _____ Public (Federal, State, Local or Other Political Subdivisions)

C. Cost

7. Your Cost of Material for Construction* \$ _____

*(If not provided the cost will be figured by the City using the National Building Standards Valuation Data Sheet 4-98)

To Be Installed (but Not included in the above cost):

a. Electrical – without labor \$ _____

b. Plumbing – without labor \$ _____

c. Mechanical - without labor \$ _____

8. TOTAL COST OF IMPROVEMENT \$ _____

D. Proposed Use (If this is an Addition, Enter Proposed Use in D-14, Other)

- 9. _____ One Family
- 10. _____ Two or More FamilyEnter # of Units _____
- 11. _____ Transient Hotel, Motel, or Dormitory.....Enter # of Units _____
- 12. _____ Garage
- 13. _____ Carport
- 14. _____ Other, specify: (Family Room, Bedroom, Basement, Etc.)

IV. SELECTED CHARACTERISTICS OF BUILDING

For New Buildings and Additions, complete items E-K below.

E. Principal Type of Frame

_____ Masonry (Load Bearing)
_____ Wood Frame
_____ Structural Steel
_____ Reinforced Concrete
_____ Other, specify _____

F. Principal Type of Heating

_____ Gas
_____ Oil
_____ Electricity
_____ Coal
_____ Other, specify _____

G. Type of Sewage Disposal

_____ Public or Private Company
_____ Private (Septic Tank, etc.)

H. Type of Water Supply

_____ Public or Private Company
_____ Private (Well, cistern)

I. Type of Mechanical

Will there be Air-conditioning? ___ Yes ___ No
Will there be an Elevator? ___ Yes ___ No

J. Number of Off-Street Parking Spaces

Enclosed _____

Outdoors _____

K. Residential Buildings Only:

of Bedrooms : _____

of Bathrooms: _____ Full _____ Three Quarters

_____ Half _____ Basement Rough In

V. PLAN REVIEW RECORD (For Building Inspector's Use Only)

Plan Review Required	Date Application Rec'd	Received By	Approval Date
Building			
Plumbing			
Electrical			
Other			

VII. ZONING PLAN NOTES

Site Zoned for:

Use:

Front Yard: _____

Side Yard _____ Side Yard _____

Rear Yard _____

Variance Required: _____ Yes _____ No

(g:/...forms/bldg dept/residential building permit)