

CITY OF BUHLER, KANSAS

Permit No. _____

Zoning District: _____

APPLICATION FOR ZONING PERMIT AND OCCUPANCY CERTIFICATE

Name of Owner _____

Address _____ Phone _____

Name of Contractor as Agent of Owner _____

Address _____ Phone _____

Street Address or General Location of Property _____

Legal Description: Lot(s) _____ block _____ Subdivision: _____

Type of Work: Construct ___ Structurally Alter ___ Move ___ Other _____

Existing Use _____ Proposed Use _____

Zoning Lot Data: Frontage _____ Feet Width * _____ Feet

Depth _____ Feet Area _____ Sq. Ft.

Building Information Principal Structure/Use Accessory Structure/Use

Width (Feet) _____

Depth (Feet) _____

Floors (Number)/Height (Ft.) _____

Total Floor Area (Sq. Ft.) _____

Total Lot Coverage (%) _____

Dwelling Units (Number) _____

Surface Area of Signs (Sq. Ft.) _____

Sign with Largest Area (Sq. Ft.) _____

Maximum Height of Signs (Ft.) _____

Height/Percent of Open Space of Front Yard Fence _____

Setback Information

Front Yard (Feet) _____

Front/Side Yard (Feet)** _____

Side Yard (Feet) _____

Rear Yard (Feet) _____

* Should be calculated at the required front yard setback line.

** Corner lots have two or more front yards.

Water Supply _____ Sewage Disposal _____

Number of permanent Off-Street Parking Spaces _____

Plot Plan of lot, structure(s), parking space(s) and driveway(s) attached:
Yes _____ No _____

The undersigned hereby certifies that: (1) They have read and understand the accompanying form entitled, "Instructions to the Applicant Filing for a Zoning Permit and/or Occupancy Certificate"; (2) The information given herein is correct; (3) They agree to comply with all provisions of the Zoning Regulations; (4) All rights-of-way, easements, setback lines, access controls and other building or use restrictions as shown on a recorded plat or separate instrument are accurately indicated to scale on the attached plot plan; (5) Except for permitted grading, no construction has been initiated on the zoning lot; and (6) They understand that any Permit or Certificate issued upon false statement of any fact which is material to the issuance hereof shall be null and void.

_____, 20__

(Owner or Contractor's Signature)

ZONING PERMIT

Amount of Zoning Permit/Occupancy Certificate fee received: \$ _____

Zoning Permit (approved) (not approved) _____ By _____
(Date) Zoning Administrator

(Conditions of approval) (Reasons for not approving): _____

cc: Applicant
Building Inspector

County Sanitation Officer
Floodplain Administrator

OCCUPANCY CERTIFICATE

All of the foregoing applicable items in the application were field inspected on _____ and the premises are hereby approved for the above stated proposed structure(s) and/or use(s).

Approved _____ By _____
(Date) Zoning Administrator

cc: Applicant
County Appraiser's Office

CITY OF BUHLER, KANSAS

PLOT PLAN

This Plot Plan is to accompany the application for a Zoning Permit and Occupancy Certificate of _____ (Owner) (Contractor) dated _____, 20___. In addition to data required by Section 2 of the Instructions to the Applicant Filing for a Zoning Permit and Occupancy Certificate, the applicant must show on the Plan below the adjacent street names, scale and an arrow pointing north. Setbacks for yards must be measured from the lot lines of the property. Eight lines on the grid equal one inch.

Scale: _____ Draw North Arrow:

