



Planning and Zoning
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Jurisdiction: _____
Parcel #: _____
Tax District: _____

Permit Number: _____
Value of Improvements: _____
Zoning Classification: _____

APPLICATION FOR ZONING/BUILDING PERMIT

DIRECTIONS: Please fill in the following required information accurately and completely. A site plan drawn to scale must be attached to this application. Show all existing and proposed buildings, including dimensions from the buildings to the lot lines. **THIS APPLICATION IS NOT ACCEPTABLE UNLESS REQUIRED INFORMATION IS FURNISHED.**

Owner: _____

Project Address: _____

New construction proposed: _____ Residential _____ Accessory _____ Commercial _____ Industrial

Addition to existing building: _____ Residential _____ Accessory _____ Commercial _____ Industrial

Other: _____ Deck _____ Repair _____ Building relocation

Type of and proposed use of structure or building: _____

Legal Description: _____

Estimated Cost of Materials: _____ **Estimate Value of Structure:** _____

Estimated Start Date: _____ **Estimated Completion Date:** _____

Contractor: _____ **Electrician:** _____

Certified Sewer Installer: _____

Is structure in flood plain: _____ **Basement completion date** _____

Dimensions of structure: _____ x _____ **Height of structure** _____

If residential: # of bedrooms _____ **# of bathrooms** _____

Area of Property in Acres or Square Feet: _____

If being moved in, where is it coming from (name & legal): _____

Distance Structure from:

Front property line or edge of right-of-way: _____ **Rear property line:** _____

Side property line: _____ **Side property line:** _____

PLEASE SEE REVERSE SIDE FOR ADDITIONAL INFORMATION

Permit is good for six (6) months to begin construction, two (2) years to finish this project.
Attach a site plan with application.

The applicant will mark lot line corners and proposed construction corners in order to measure setbacks.

If a culvert is required, this must be paid for by the property owner. An application must be filed at the Adams County Road Dept. for the placement of the culvert prior to an address being assigned.

Please verify with County Floodplain Administrator, at the County Road Dept., whether or not your property is in the flood plain.

The applicant will comply in all respects with the regulations of Adams County, Nebraska regulating zoning in said County and authorizes the County Zoning Administrator and/or officials to enter the property to inspect during normal working hours for the purpose of becoming familiar with the proposed situation.

I hereby affirm the accuracy of the above information and certify that I and my sub-contractors will abide by the zoning regulations of Adams County, Nebraska.

Covenants applicable to lots within a subdivision may have restrictions that are in excess of the requirements of the applicable zoning regulations. It shall be the responsibility of the person(s) to whom this permit is issued to comply with all applicable covenants on the property for which this permit is issued.

Location, ownership, and details must be correct, complete and legible. Separate application required for each building. Submit a drawing showing the lot and dimensions, existing buildings and dimensions, and proposed building and dimensions and setbacks from property lines.

In consideration of this issuance of this permit, the applicant hereby certifies that the above 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 application may be subject to the penalties outlined in Nebraska Revised Statutes §23.114.05.

APPLICANT: _____

ADDRESS: _____

PHONE: _____

SIGNATURE: _____

DATE: _____

OFFICIAL USE ONLY

Prop. Imp Stmt # _____

County Assessor _____

Road Dept. for Address _____

Date _____

Flood Plain Verified _____

New Assigned Address _____

Paid _____

Zoned Use _____

Inspected by _____

Approved _____ Denied _____

Permit Fee \$ _____ Permit # _____

Zoning Administrator _____

Check No. _____ Receipt No. _____