

Application No. _____

City of Halstead, Kansas

BUILDING PERMIT

Ask about the NEIGHBORHOOD REVITALIZATION PLAN. If you qualify, application must be made concurrent with building permit.

(This application, when signed by Zoning Administrator, shall be a permit)

Property Owner _____

Owner's Phone # _____

Location _____ Addition _____ Block _____ Lot _____

Work Proposed _____

Outside Dimensions of Building

First Floor _____ Walls _____ Roof _____

Second Floor _____ Floors _____ Foundation _____

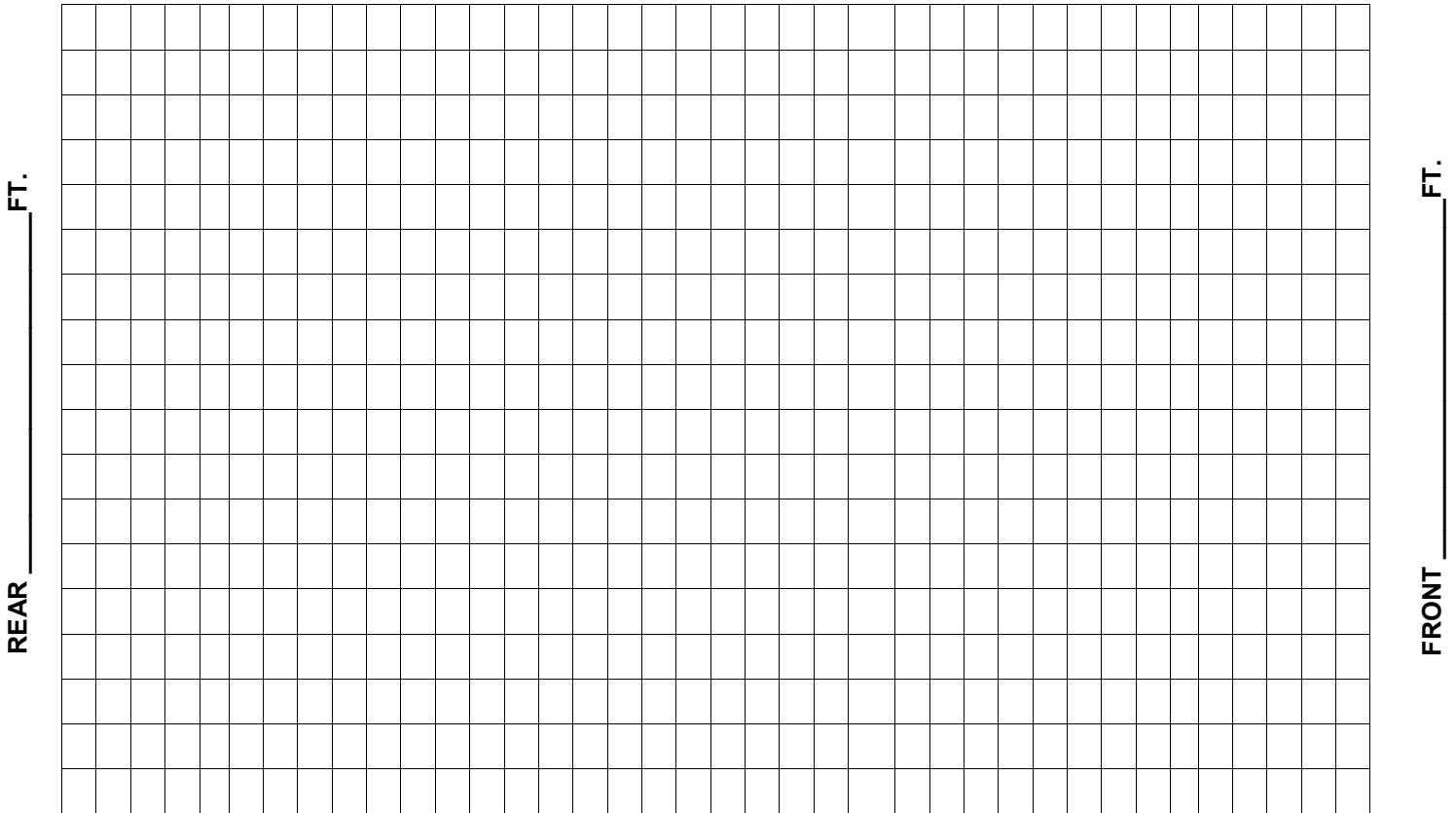
Basement _____ Ceilings _____

Estimated Cost _____ Work Commence _____ Work Completion _____

Contractor Name _____ Phone # _____

Contractor Licensed with the City of Halstead? Yes No

LENGTH OF LOT _____ FEE _____



Permission is hereby granted to enter premises and make all necessary inspections.

I certify that all improvements will conform to the Ordinances of the City of Halstead.

Signed _____

Print Name _____

By signing this form I acknowledge that I am aware of where the property lines are and understand the required setbacks.

Permit Fee _____

Inspection Fee _____

Date _____

Approved by _____
Zoning Administrator

Property in Flood Hazard Area: ____ Yes ____ No