APPLICATION FOR BUILDING PERMIT CITY OF COLUMBUS, NEBRASKA

The undersigned hereby applies for a permit to: of the City of Columbus, Nebraska. Said building as follows:					
	Owner's Current Addres	SS:			
Project Address: (If different from above)					
Lot: Block: Si	ubdivision/Addition:				
Use of Building: Residence Multiple I		use Busine	ss/Industr	y 🔲 Garage/Storage	e/Utility
Class of Work: New Addition Ren	•				-
Briefly describe project:				·	,
IF APPLICATION IS FOR NEW BUILDING/STR Building Dimensions: X					
No. of Living Units: Number of S	itories <u>: </u>	hed Area Belov	v Grade:		
Plans by: Architect Engineer Designer				- t :	
	submitted, you do not need to				
Depth Below Grade:	Floor:		Opun		
Footing Size:	_ Floor Beams:				
FDN Wall Thickness: Water Proofing:	_ Root Ratters:	<u> </u>		<u> </u>	
Exterior Wall	Header:				
Masonry Thickness ·					
Stud Size & Spacing : Grade of Lumber:	_ <u>Finish</u> :				
Roof	_ Utiler. Specify				
Roof Sheathing Type & Size:	Roofin	g Material:			
ALL ADDITIONALS COMPLETE THE SECTION	I NOTE: Floatrical and alumi	hina work (if on	nliaahla) ra	ovira aanarata narmita	
ALL APPLICANTS COMPLETE THIS SECTION					i.
Building Contractor:					
Electrical Contractor :		C	ost:		
Plumbing Contractor :		C	ost:		
		D TOTAL CO			
I hereby certify that dimensions of lot and building an					Na luma huua
and will adhere to same and abide by any and all proupon which this application is based.	ovisions made by any authorize	ed City official of	board or o	rdinance of the City of C	olumbus,
эрэг гингийн эрригийн ган ган ган ган ган ган ган ган ган га	Email:				
Ciamatuma	Dhana		Data		
Signature:(Applicant)	Phone:		_ Date:_		
APPLICANTS - DO NOT CO	OMPLETE ANYTHING	BELOW THI	S LINE.	THANK YOU!	
Flood Zone; Elevation of Fi	rst Floor (Basement is consid	dered first floor)			
Occupancy Group: Use Zone:	Type:				
Comments:					
<u> </u>					
Permit: Approved Denied Fee	e: \$Per	mit Number:			
Signature:		Date	:		
(Building Inspect	,				
We the Board of Adjustment, sitting as Board of 19-910 and ordinances of the City of Columbus,		ted authority un			nd
Conditions/Comments:					
Signature:		Da	ate:		
(Chairman of the Board))				
For Completion By Clerk's Office Upon Receipt of	of Payment Date:	Re	ceipt No.		_