



**Building Permit Application**  
**715 Railroad Street, Downs, KS 67437**  
**(785) 454-6622; fax (785) 454-6246**  
[cityclerk@cityofdowns.com](mailto:cityclerk@cityofdowns.com)

Office Use Only:
Permit # _____
Paid Amount \$ _____

Application for building permit, the undersigned hereby makes application with the City of Downs to:

*Construct - Alter - Repair - Remove & Replace - Demolish - Other: \_\_\_\_\_*

*House - shed - garage - fence - cement construction - Other: \_\_\_\_\_*

Applicant Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Permit Location: \_\_\_\_\_

Describe Scope of Work: Said building (or fence) will be \_\_\_\_\_ feet across the front, \_\_\_\_\_ feet deep, \_\_\_\_\_ stories high; and to be constructed of \_\_\_\_\_ with a \_\_\_\_\_ roof; foundation of \_\_\_\_\_, and the plot of ground contains \_\_\_\_\_ square feet.

Contractor(s): \_\_\_\_\_ Phone: \_\_\_\_\_

Electrician (if applicable) \_\_\_\_\_ Phone: \_\_\_\_\_

Plumber (if applicable) \_\_\_\_\_ Phone: \_\_\_\_\_

**All contractors, plumbers and electricians shall be licensed with the City of Downs.** Exception: a resident home owner may perform his own plumbing and electrical work with the exception of main line tapping.

Building Permit Costs: \$10 fee plus \$1 per thousand dollars of the project. Estimated construction costs shall include all materials and labor. **Estimated Cost:** \_\_\_\_\_

• **Owner or Contractor must contact Kansas 1-800-DIG SAFE (1-800-344-7233) before proceeding with any type of digging or excavation.**

• **Have you applied for Neighborhood Revitalization through Osborne County? New homes or buildings over \$50,000 are eligible.**

*I understand and agree that this application in no way establishes or determines the location and boundaries of the above-described property. I hereby acknowledge that I have read this application and state that all the distances and information given on this application is correct, and agree to comply with all city ordinances and state laws regulating building construction and agree to procure all necessary permits. I understand that the requested building permit, if issued, will expire six (6) months from the date of its issuance, unless work is commenced.*

\_\_\_\_\_  
SIGNATURE OF OWNER

\_\_\_\_\_  
(DATE)

**BUILDING/ZONING OFFICER WILL INSPECT THE BUILDING SITE**

\_\_\_\_\_  
Building/Zoning Inspector Signature

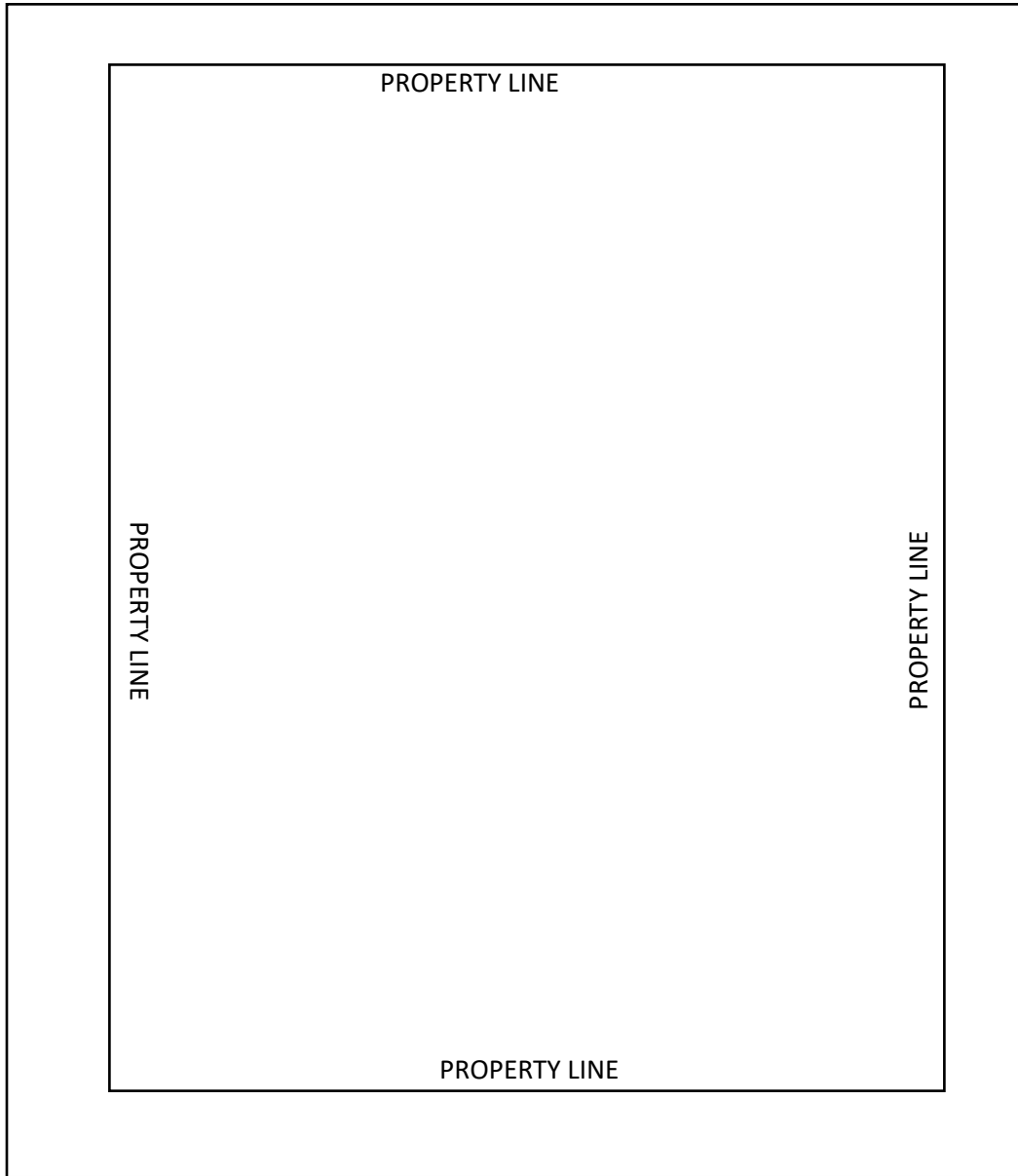
\_\_\_\_\_  
Date

Approved

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Denied

\_\_\_\_\_  
Governing Body Member Signature



### PLOT PLAN

#### DIRECTIONS:

1. Give dimensions of lot.
2. Give outside dimensions of building
3. Give location of any existing building(s) on lot.
4. Give distance from each lot line to building.
5. Show direction building fronts.
6. Show location of street, if corner lot show both streets.
7. Located in: Business, Semi-Business, Industrial, Residential zone (circle applicable zone)