

**APPLICATION FOR ZONING PERMIT  
RED WILLOW COUNTY, NEBRASKA**

**KEEP PERMIT ON PREMISES DURING CONSTRUCTION**

<u>APPLICANT:</u>	<u>CONTRACTOR:</u>
NAME: _____	NAME: _____
ADDRESS: _____ _____	ADDRESS: _____ _____
PHONE #: _____	PHONE #: _____
EMAIL: _____	EMAIL: _____

LEGAL DESCRIPTION OF PROPERTY & PARCEL ID# \_\_\_\_\_

LOT SIZE OR # OF ACRES \_\_\_\_\_ ADDRESS OF PROPERTY (IF DIFFERENT THAN APPLICANT'S ADDRESS) \_\_\_\_\_

**PROJECT INFORMATION**

STRUCTURE TO BE \_\_\_\_\_ ERECTED \_\_\_\_\_ MOVED \_\_\_\_\_ ENLARGED

TYPE OF STRUCTURE OR BUILDING PROPOSED \_\_\_\_\_

PROPOSED USE OF STRUCTURE \_\_\_\_\_

DIMENSIONS OF STRUCTURE \_\_\_\_\_ X \_\_\_\_\_ HEIGHT OF STRUCTURE \_\_\_\_\_

TYPE OF CONSTRUCTION: WOOD METAL POLE CONCRETE OTHER \_\_\_\_\_

ESTIMATED COST OF PROJECT (LABOR & MATERIALS) \$ \_\_\_\_\_

APPROXIMATE DATE CONSTRUCTION WILL: START \_\_\_\_\_ FINISH \_\_\_\_\_

IS A SEPTIC SYSTEM REQUIRED FOR THIS STRUCTURE? \_\_\_\_\_ YES \_\_\_\_\_ NO

IS THE STRUCTURE LOCATED IN A FLOODPLAIN? \_\_\_\_\_ YES \_\_\_\_\_ NO IF ANSWER IS YES, A FLOODPLAIN DEVELOPMENT PERMIT SIGNED BY THE FLOODPLAIN ADMINISTRATOR **MUST BE ATTACHED** TO APPLICATION.

IN CONSIDERATION OF THE ISSUANCE OF THIS PERMIT, THE APPLICANT HEREBY CERTIFIES THAT THE INFORMATION ABOVE AND ATTACHED 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 ZONING PERMIT BECOMES NULL AND VOID AND APPLICANT MAY BE SUBJECT TO PENALTIES ESTABLISHED.

UPON SIGNING THIS APPLICATION, THE APPLICANT IS ALLOWING THE ZONING ADMINISTRATOR OR AUTHORIZED PERSONNEL TO ENTER UPON THE PROPERTY FOR THE PURPOSE OF INSPECTION. THIS PERMIT IS VALID FOR 2 YEARS.

SIGNATURE OF PROPERTY OWNER \_\_\_\_\_ DATE OF APPLICATION \_\_\_\_\_