

Building Permit Application

City of Bayard
P.O. Box 160 – 445 Main St
Bayard, NE 69334
308-586-1121/ FAX 308-586-1834



Permit #: _____

Date: _____

Property Owner: _____ Phone #: _____

Project Address: _____

Legal Description: _____

Tax Parcel #: _____ Zoning District: _____

Contractor: _____ Contractor License #: _____

Phone #: _____

Category of Work: New Construction Addition Remodel

Property Use Type: Commercial Residential

Description of Work: _____

Estimated Value of Work \$ _____

Building Permit Fee: \$ _____

Payment Method: Cash / Check /CC

Bill To: _____

Inside the Flood Plain? Yes No

If yes, a Floodplain Development Permit will also be required.

Outside Dimensions: Length _____ Width _____ Height _____ Roof Type _____

Typical inspections required for construction include but are not limited to:

Site plan lay out - Foundations and footings - Prior to covering structural members - Final inspection before occupancy
- Location of all structures (existing & proposed) - All dimensions of proposed improvements -Distance of improvements to property lines and structures

When applicable, separate permits are required for electrical, plumbing, and mechanical installations as well as any construction, obstruction, or excavation within the City right of way.

If the work authorized by the permit has not begun within 180 days from the date of issuance, or if the work is suspended or abandoned for more than 180 days, the permit shall be considered expired. The Building Official may grant one or more extensions of not more than 180 days each.

CALL DIGGER'S HOTLINE BEFORE DIGGING: 1-800-331-5666

I hereby acknowledge that I have read this application and state that the information is correct, that the work will only be comprised of that stated above, and that I agree to comply with all City Ordinances regulating building construction. In addition, I understand that any work done beyond that stated above, unless approved by the Building Official, will result in the issuance of a Stop Work Order and other enforcement action by the City.

Applicant Signature

Date

City Representative

Date

Scottsbluff Building Inspector

Date