CITY OF VALLEY

P.O. Box 682
Valley, NE 68064
Phone: 402-359-2251 Ext. 306
Fax-402-359-2610
www.valleyne.org

Business Hours 9 am – 5 pm M-F

Official Use Only

Permit Number _____

☐ Check ☐ Cash ☐ Credit Card

Check # _____

RESIDENTIAL REMODEL – ADDITION PERMIT APPLICATION

☐ **Basement Finish (SF)** ☐ **Room Addition (SF)** ☐ **Remodel (SF)** ☐ **Other (SF)**

Address of project _____

Legal Description: _____
(Lot) (Subdivision)

Owner of Property _____
(Name) (Address) (City, State, Zip) (Phone)

***General Contractor:** _____
(Name) (Address) (City, State, Zip) (Phone)

*Only owners that reside in the address of the project (single family home) are permitted to act as the contractor.

Total Value of proposed work $ _____ **Permit Fee $** _____
(Includes all materials, labor and profit for finished project)

Please provide all of the applicable documents below:

☐ **Describe Project:** _____

☐ **Detailed Drawings** (permit will not be accepted unless detailed drawings have been submitted) ☐ **Site Plans**

☐ **Elevation Certificate** ☐ **Floodplain Development Permit** ☐ **Plumbing, Mechanical & Electrical Permit Application(s)**

I hereby state that that the information submitted on this application is accurate and correct. I recognize that the issuance of this building permit shall not grant approval to violate any of the provisions of the building codes or zoning ordinances enforced by this jurisdiction, state or federal law; and that this permit shall not prevent the building official from requiring construction to be in compliance with all applicable code provisions during field inspections. This permit shall become null and void if no construction work has commenced within 180 days from date of issuance or if work has commenced then stopped for more than 180 days. This building permit is issued for the express purpose of work started on this application and shown on the approved plans. Any changes to the construction plans that affect the scope of work shall be approved by the building official prior to construction and may require another permit application. No permit fee is refundable if work has not commenced and more than 180 days has elapsed after issuance date.

Applicant Name (Print clearly):_____ **Signature:**_____ **Date:**_____

Contact Name (Print clearly):_____ **Phone:**_____ **Fax:**_____
Person to answer questions regarding construction drawings and other code compliance issues.

Contact Email Address (optional)_____

The property shall comply with all applicable City of Valley Zoning Ordinances. All neighborhood covenants and easements are the responsibility of the builder or homeowner.

OFFICIAL USE ONLY

Approving Official: _____ Date: _____

Notes: