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Business Hours 9 am – 5 pm M-F

**Official Use Only**

Permit Number \_\_\_\_\_  
 Check     Cash     Credit Card  
Check # \_\_\_\_\_

**CHANGE OF OCCUPANCY PERMIT APPLICATION**

Provide accurate information per 2006 IBC

Address \_\_\_\_\_

Previous Use: \_\_\_\_\_ Fire sprinkler provided:  Yes  No

Previous Occupancy Group: \_\_\_\_\_

Legal Description: \_\_\_\_\_  
(Lot) (Subdivision)

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

Corporate Business Name: \_\_\_\_\_  
(Name) (Address) (City, State, Zip) (Phone)

New Use: \_\_\_\_\_ Fire sprinkler provided:  Yes  No

Description: \_\_\_\_\_  
\_\_\_\_\_

Type of Construction: \_\_\_\_\_ Occupancy Group: \_\_\_\_\_ Total Area: \_\_\_\_\_

Number of Parking stalls provided: \_\_\_\_\_ New Occupancy Load: \_\_\_\_\_ Number of Exits: \_\_\_\_\_

Separate permits are required for Construction, Mechanical, Electrical, Plumbing and Signage

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 building shall comply with latest building code requirements for structural, electrical, plumbing and mechanical provisions currently latest adopted codes at the time a permit is issued. A separate building permit application is required prior to any construction.

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) \_\_\_\_\_

**OFFICIAL USE ONLY**

Building / Inspection report attached      Application fee: \$ \_\_\_\_\_

Reviewed by: \_\_\_\_\_ Building Department: \_\_\_\_\_ Planning Department: \_\_\_\_\_ Public Works: \_\_\_\_\_

Approving Official: \_\_\_\_\_ Date: \_\_\_\_\_

Notes: \_\_\_\_\_