

RESIDENTIAL PERMIT APPLICATION

City of Hays
 Planning, Inspection & Enforcement
 1002 Vine St.
 Hays, Kansas 67601
 (785) 628-7310
 (785) 628-7352 fax



Application Date: _____
 Site Plan
 Building Drawings
 Window Schedule
 Truss Package/Bracing
 Plumbing Drawing and Fixture Schedule

2015 IRC & IFC, 2014 NEC, 2009 UMC & UPC
 2012 Green Plumbing & Mechanical Code Supplement
 (with amendments)

Property Information

Street Address	Apt	Zip
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Owner Information

First Name	Last Name	Phone	
Street Address (Leave blank if same as above)		City	State

Contractors Information

	Name	Mailing address	Phone
Applicant (not owner)			
General			
Email Address		State Registration Roofing #	
Concrete/Foundation			
Email Address			
Structural			
Email Address			
Roofing			
Email Address		State Registration Roofing #	
Electrical			
Email Address			
Plumbing			
Email Address			
Mechanical			
Email Address			
Architect			
Email Address			

Construction Information

Type of Improvement	(Sq Ft)		(Finished)
_____ New Single Family Dwelling	_____	_____ First floor	_____ # of Bedrooms
_____ New Duplex	_____	_____ Second floor	_____ # of Full Baths
_____ Detached Structure/Garage	_____	_____ Basement (finished)	_____ # of 1/2 Baths
_____ Addition/Remodel	_____	_____ Basement (unfinished)	_____ Total # of Plumbing Fixtures
_____ Egress Windows	_____	_____ Garage	_____ Basement Wall Height
_____ Deck	_____	_____ Total Sq. Ft.	_____ Gas Fire Place
_____ Swimming Pool	_____	_____ Crawl Space	_____ Wood Burning Fire Place
_____ Foundation Repair	<input type="checkbox"/> Y <input type="checkbox"/> N	_____ Located in Flood Zone	_____ Commencement Date
_____ Other	_____	_____	_____ Expected Completion Date
	Water Meter Size	_____	_____ \$ Estimated Cost of Project
	_____ 5/8"		
	_____ 3/4"		
	_____ 1"		

Project Description:

(Please include a detailed description for all general construction, mechanical, electrical & plumbing work being performed)

Mechanical:

Plumbing:

Electrical:

Neighborhood Revitalization Program

(Must select one of the following)

_____ My property is not within the Neighborhood Revitalization District Boundry

_____ My property is within the Neighborhood Revitalization District Boundry but I wish to decline

_____ My property is within the Neighborhood Revitalization District Boundry and I wish to participate.
(If you are wanting to participate you will have to apply for the program within 60 days from the building permit approval)

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of the record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of the jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

Signature of Applicant _____ Phone Number _____ Date _____

Responsible person in charge of work, Title _____ Phone Number _____

Email _____