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 # _____

COMMERCIAL BUILDING PERMIT APPLICATION

2009 COMcheck calculation worksheet attached ☐ **Yes** ☐ **No** (2006 certification required)

☐ **New Building** ☐ **Addition to Building** ☐ **Remodel** ☐ **Tenant Finish** ☐ **Other** (describe) _____

Describe type of project / business: _____

Address of project: _____

Legal Description: _____
(Lot) (Subdivision)

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

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

Architect: _____
(Name) (Address) (City, State, Zip) (Phone)

Engineer: _____
(Name) (Address) (City, State, Zip) (Phone)

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

Provide accurate information per 2006 International Building Code

Type of Construction: _____ **Occupancy Group:** _____ **# of Stories:** _____ **Height:** _____ **Total Area:** _____ **# of elevators:** _____

Fire Sprinkler Required: ☐ **Yes** ☐ **No** **Fire Sprinkler Provided:** ☐ **Yes** ☐ **No** **# Parking Spaces provided:** _____ **# ADA Parking:** _____

 # Tenant Spaces: _____ **# Apartment Units:** _____ **Size of domestic water line:** _____ **Size(s) of all water meters:** _____

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

Total Value of proposed work $ _____
(Includes all materials, labor and profit for building. Does not include landscaping, site work or value of land)

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 the 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 stated on this application and shown on the approved plans. Any changes to the construction plans that effect area or scope of work shall be approved by the Building Official prior to construction and may require another permit application. No permit fee refunds are allowed if work has commenced or if work has not commenced and more than 180 days has elapsed after issuance date. No building shall be occupied until a certificate of occupancy has been issued by the Building Official. The property shall comply with all applicable City of Valley Zoning Ordinances. All neighborhood covenants and easements are the responsibility of the builder or owner.

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
Approving Official: _____ Date: _____

Notes: _____