SEWARD COUNTY
APPLICATION FOR ZONING PERMIT - ACCESSORY DWELLING

Date: _____   **Zoning Permit #**: _____

Legal Description: Precinct: _____ Section: _____ Township: _____ Range: _____ Quarter:_____

Parcel : _____ Acres: _____ Zone ID: _____

Owner: _____ Phone _____

Address: _____ Email**:** _____

CLASS OF WORK

Type of Construction: _____ Stick Built or Prefab? _____

Dwelling Square Footage: _____ Number of Stories: _____ Single Family: _____ Multi Family: _____

Number of bathrooms _____ Basement Finish Type_____ (Living Space, Storage, etc.)

Basement square footage_____ Garage: Attached___ Detached____ Garage square footage_____

If House is being moved in, where is it coming from? _____

ZONING REQUIREMENTS
*ALL BUILDINGS WILL BE BUILT BY: IBC CODE STANDARDS 2018 OR BETTER
*ALL WELL, SEPTIC, SEWER OR LAGOON STANDARDS ARE ADHERED TO BY: DEQ REGULATIONS: TITLE 124
*AN ELECTRICAL INSPECTION IS REQUIRED FOR ANY CONSTRUCTION.

Front Setback: _____ Side Yd: _____ Rear Yd: _____ Distance from principal home_____

Principal dwelling square footage_____ Is this construction on a Minimum Maintenance Road?_____

Has a driveway permit completed? _____ An address will not be given without completed driveway permit

Is this property in the Flood Plain? _____ If yes, does the Landowner understand this liability? _____

Builder: _____

Plumber: _____

Electrician: _____

ESTIMATED COST $_____

Plans and Schedules submitted: _____ sets.

FEE: $ 125.00   Receipt #: _____

I hereby certify that the above statements are correct and that if a Zoning Permit is issued, all work will be done in accordance with all applicable Seward County Zoning Regulations.
The permit is valid for 1 year from approval date.

_____
Applicant Signature

_____   _____
Approval Date   **Project must be Completed by**

_____
Administrator Signature

I UNDERSTAND THAT THE COUNTY ASSESSOR'S OFFICE WILL BE OUT FOR BUILDING ASSESSMENT AND PHOTOS. I UNDERSTAND COUNTY ZONING WILL INSPECT COMPLETED STRUCTURE FOR ISSUANCE OF CERTIFICATE OF OCCUPANCY _____ Applicant initials