# City of Arkansas City, Kansas Neighborhood Services Phone: 620-441-4420 Fax: 620-441-4403 Remodel/Repair of Single-Family Dwelling Permit Application

# PRIOR TO ACCEPTANCE OF APPLICATION, THE FOLLOWING MUST BE SUBMITTED:

- 1. Scaled floor plan showing room dimensions, room identification, interior walls, stairways, exits, etc.
- 2. The following needs to be completed on the permit application located on the back of this page:
  - a. Date
    - b. Job address of property
    - c. Owner Name, Address & Phone Number
    - d. Contractor Name and Phone Number
    - e. Trades Contractors
    - f. Work Description needs the following information:
      - i. How many stories?
      - ii. Areas to be remodeled or repaired
      - iii. Will the roof structure be altered in any way? If so, explain.
      - iv. Explain any structural works if any needs to be done.
      - v. Describe any other work that will be done if it hasn't already been explained.
    - g. Valuation of work
      - i. MUST include materials and labor. Labor must be included if property owner is completing work.
- 3. The provisions and requirements of the City of Arkansas City Municipal Code and adopted construction codes of the City of Arkansas City with regards to the construction of Single-Family Dwellings including the following stipulations:
  - a. Project is subject to inspection at various stages of the construction process. It is the responsibility of the permit applicant to contact the inspection office at 620-441-4420 for inspections and to keep the work accessible until approved by the inspector and keep the plans on site.
  - b. Project is subject to compliance with zoning regulations as determined by the Municipal Code
  - c. Post permit in conspicuous place
  - d. It is the responsibility of the applicant, owner and/or contractor to locate property lines, build the structure according to the approved site plan and permit, and contact 1-800-DIG-SAFE for the location of utilities on said property.

# **REQUIRED INSPECTIONS:**

# **Footing Inspection:**

Shall be made after excavations for footings are complete and any required reinforcing steel is in place.

# Foundation Inspection (Basement or stem wall):

Shall be made after all forms and supports are installed and reinforcement steel is in place.

# **Concrete Slab or Under – Floor Inspection:**

Concrete slab and under-floor inspections shall be made after the in-slab or under-floor reinforcing steel and building service equipment, conduit, piping accessories and other ancillary equipment items are in place, but before any concrete is placed or floor sheathing installed.

# **Rough Inspection:**

Frame inspections shall be made after the roof deck or sheathing, all framing, fire blocking and bracing are in place and pipes, chimneys and vents to be concealed are complete and rough electrical, plumbing, heating wires, pipes and ducts are approved.

# **Drywall Inspection:**

Gypsum board inspection shall be made after the gypsum board, interior and exterior is in place, but before any plastering is applied or before fasteners are taped and finished.

# **Fire-Resistant Penetrations:**

Protection of joints and penetrations in fire-resistance-rated assemblies shall not be concealed from view until inspected and approved.

# **Final Inspection:**

The final inspection shall be made after all work required by the permit in completed.

# **Storm Water Inspections:**

Best Management Practices

# **Other Inspections:**

In addition to the inspections noted above the building official is authorized to make or require other inspections of any construction work to ascertain compliance with the provisions of the building code and other laws enforced the office of the building official.

# City of Arkansas City, Kansas Application for Construction Permit

Permit		Permit Fee:			Plan Review Fee:			Total Fee:			
A. Date:	B. Job Addres	s:	I			Parcel Address:			Zone:		Zone:
Legal Description:	Lot Number:	Block:	Addition:			1			CAMA #:		<u> </u>
C. Owner:			Address:				Phone:				
D. Contractor:			E. Electrician:			E. HVAC:		E. Plumber:			
Phone Number:			USE OF BUILDING RESIDENTIAL COMMERCIAL								
CLASS OF WORK	□ NEW □ ADDITION □ ALTERATION □ MOVE □ REMOVE □ REPAIR □ FENCE □ SIGN □ CURB CUT										
Construction Type:	Occupancy Class: Oc		upant Load: Number of Stories:		P	Project Size:		e:	Floodplain: YES NO		loodplain Zone Elevation:
F. WORK DESCRIPTION:											
SPECIAL CONDITIONS:											
TO SCHEDULE INSPECTIONS: 620-441-4420											
G. VALUATION (INCLUDE ALL LABOR AND MATERIALS):											
THAT THE SAID BUILDING SHALL BE CONSTRUCTED, REMODELED, REPAIRED, IN ACCORDANCE WITH ALL THE REQUIREMENTS OF THE LAWS OF THE STATE OF KANSAS AND THE ORDINANCES OF THE CITY OF ARKANSAS CITY RELATIVE TO <b>FIRE REGULATIONS AND ZONING</b> AND ALL OTHER REGULATIONS CONTROLLING SUCH WORK, IN A SUBSTANTIAL AND WORKMANLIKE MANNER AND ACCORDING TO THE RECOGNIZED STANDARD METHODS OF CONSTRUCTION EMPLOYED FOR THE TYPE AND CLASS OF BUILDING ADOPTED FOR THIS BUILDING; THAT THE CITY OF ARKANSAS CITY SHALL BE HELD BY ME HARMLESS FROM ANY AND ALL LOSS AND EXPENSE OR LIABILITY OF ANY KIND WHATSOEVER WHICH THE CITY MAY SUFFER, INCLUDING ALL COSTS INCURRED IN THE DEFENSE OF ANY SUIT OR ACTION RESULTING FROM THE ISSUANCE OF THIS PERMIT, OR BECAUSE OF THE CONSTRUCTION OF THE SAID BUILDING OR COSTRUCTION, OR BY REASON OF ANY ACT OR THING DONE BY VIRTUE OF THIS PERMIT. <b>WORK MAY BE STOPPED OR PERMIT CANCELLED BY BUILDING OFFICIAL FOR JUST CAUSE.</b>											
I hereby certify that I have read and examined this application and know the same to be true and correct.											
Owner or Authorized Agent – Signature     Contractor – Signature									ature		
DISPOSITION OF ABOVE APPLICATION I HAVE EXAMINED THE ABOVE APPLICATION AND HEREBY APPROVE  REJECT  SAME											
REMARKS:											
						B	UILDING	OFFICIAL			DATE
				DISPOSITION C	)F AI	PPEAL BOARD					
APPROVED 🗌	REJECTED										
						P	resident o	of Board			Date