<u>Commercial Permit Requirements</u>

- Completed permit application and pay fee;
 - If the building is existing, a Certificate of Occupancy Application must be completed;
- Complete set of stamped drawings to scale;
 - If no structural alterations are being proposed an engineer's stamp is not required. An architect's stamp may be required.
 - Note: Please review the Nebraska Engineers and Architects Act.
 - If disturbing more than an acre, a Stormwater Pollution Prevention Plan must be provided along with a Notice of Intent submitted to the Nebraska Department of Environmental Quality.
 - Site plan to include all parking and landscaping requirements;
 - o If in a high hazard flood area an elevation certificate must be obtained;
 - A digital copy of all drawings is required;
- Fire Marshal review is required before a Certificate of Occupancy is issued. Working without a Fire Marshal review is at your risk.
- All electrical permits issued by the Nebraska State Electrical Division. No Certificate of Occupancy will be issued until the State Electrical inspector has completed a final inspection.
- All City of Lexington Codes must be followed

Nebraska State Electrical Division

521 South 14th Street, Suite 400 PO Box 95066 Lincoln, NE 68508-2707

PH: 402.471.3550 - FX: 402.471.4297

Billy Stevens
billy.stevens@nebraska.gov
1023 C Avenue
Kearney, NE 68847

(402) 460-0260 Cellular

Nebraska State Fire Marshal

246 South 14th Street Lincoln, NE. 68508 402-471-9469

Mike Hoeft mike.hoeft@nebraska.gov (402) 395-2164-Office (308) 530-9493-Cellular

CITY OF LEXINGTON

DEVELOPMENT SERVICES DEPARTMENT

| APPLICATION FOR COMMERCIAL CONSTRUCTION PERMIT | | | | | | |
|--|-----------|---|----------------|---|----------|--|
| OWNER | | | | | | |
| Name: | Mailing A | | iling Address: | | Unit #:: | |
| City: | State: | |): | | Zip: | |
| Phone: | Cell: | | | E-Mail: | | |
| CONTRACTOR | | | | | | |
| Name: Mail | | Mailing Address: | | Unit #: | | |
| City: State: | | State: | ate: | | Zip: | |
| Phone: | | E-Mail: | | E-Mail: | | |
| ARCHITECT | | | | | | |
| Name: | | Mailing Address: | | | Unit #: | |
| City: | | State: | | | Zip: | |
| Phone: | | Cell Phone: E-Mail: | | E-Mail: | | |
| JOB INFORMATION | | | | | | |
| Job Address: | | Flood Zone: | | Zoning: | | |
| Legal Description: | | | | Estimated Cost of Project: | | |
| Description & Location of work on premises/special conditions: | | | | NPDES # | | |
| | | | D: 11 41 | | | |
| | | | | <u>Diggers Hotline:</u> 1-800-331-5666 | | |
| BUILDING INFORMATION | | | | | | |
| Building Description | | Building Details Items Required for Submittal | | Submittal | | |
| | | Existing Area: | | Completed set of stamped drawings | | |
| | | New Area: | | SpecificationsPhysical Address | | |
| | | No. of Stories: | | SWPPP if over an acre disturbed | | |
| | | Basement Area: | | Check upon receiving stormwater | | |
| | | Type Of Construction: | | pollution prevention material from City | | |
| | | Occupancy: | | Staff. | | |
| | | Building Use: | | NOTE: | | |
| | | | | You must contact the Nebraska State | | |
| | | | | Fire Marshal and Nebraska State | | |
| | | iss | | issuance | | |
| I hereby certify I have read and examined this application and corresponding documents. All provisions of laws and ordinances governing this work will be complied with, whether specified or not. | | | | | | |
| Authorized Signature: | | | | Date: | | |
| OFFICE USE ONLY | | | | | | |
| Date Rec'd: Issued By: | | Est. Cost: | FEES CHARGED | FEES PAID | | |