

Commercial Permit Requirements

- 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 architect's stamp is not required;
 - 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;
 - 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

Gary Lofton
gary.lofton@nebraska.gov
PO Box 372
McCook NE 69001
(308) 325-2219-Cellular

Nebraska State Fire Marshall

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 Address:		Unit #:
City:		State:		Zip:
Phone:	Cell:	E-Mail:		
CONTRACTOR				
Name:		Mailing Address:		Unit #:
City:		State:		Zip:
Phone:		E-Mail:		
ARCHITECT				
Name:		Mailing Address:		Unit #:
City:		State:		Zip:
Phone:		Cell Phone:	E-Mail:	
JOB INFORMATION				
Job Address:		Flood Zone:	Zoning:	
Legal Description:			Estimated Cost of Project:	
Description & Location of work on premises/special conditions:			NPDES #	
			<u>Diggers Hotline:</u> 1-800-331-5666	
BUILDING INFORMATION				
Building Description	Building Details		Items Required for Submittal	
	Existing Area :		<ul style="list-style-type: none">Completed set of stamped drawingsSpecificationsPhysical AddressSWPPP if over an acre disturbed <input type="checkbox"/> Check upon receiving stormwater pollution prevention material from City Staff.	
	New Area:			
	No. of Stories:		<u>NOTE:</u> You must contact the Nebraska State Fire Marshal and Nebraska State Electrical Inspector before permit issuance	
	Basement Area:			
	Type Of Construction:			
	Occupancy:			
	Building Use:			
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



308-324-2341 ♦ Fax: 308-324-4590 ♦ www.cityoflex.com
406 East 7th Street ♦ P.O. Box 70 ♦ Lexington, Nebraska 68850-0070

Certificate of Occupancy Application

Business Name: _____ Date: _____

Business Address: _____

Owner/Tenant Name: _____

Owner/Tenant Address: _____

Phone: _____ E-mail address: _____

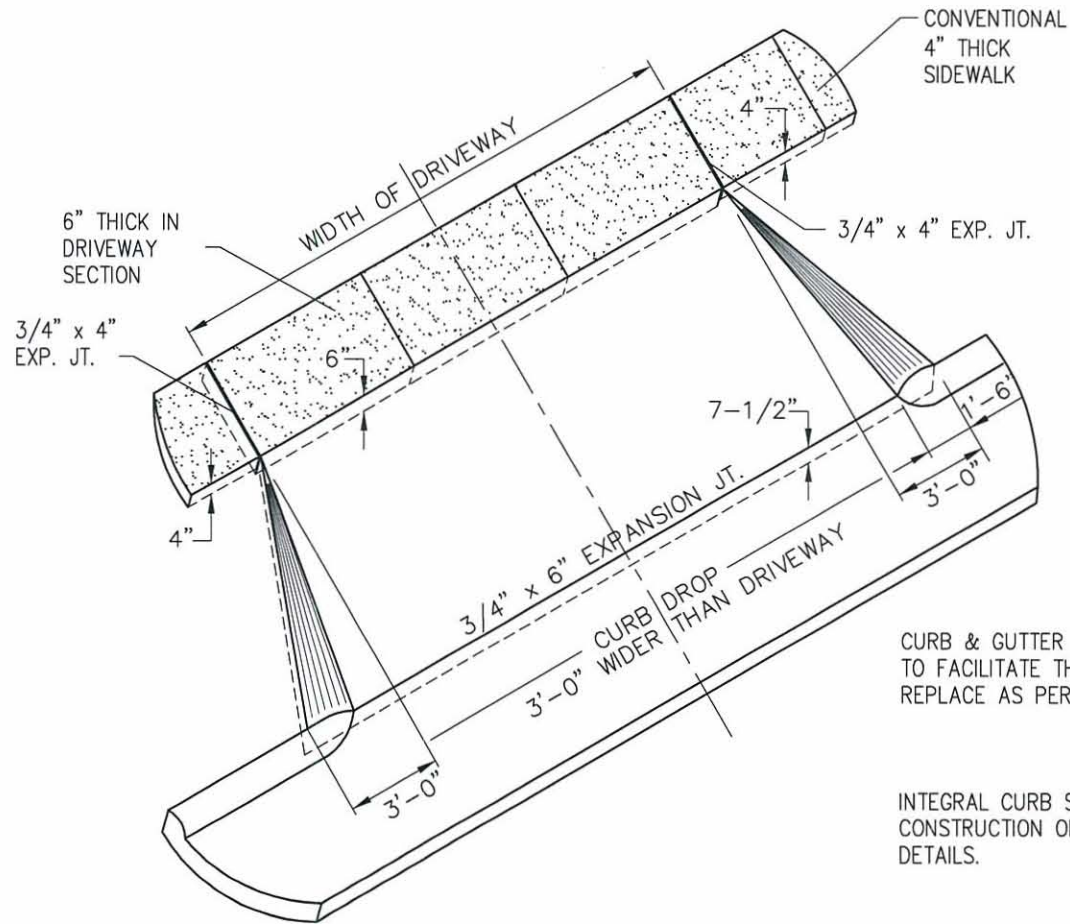
Description of the proposed business (MUST BE IN DETAIL): _____

This application for Certificate of Occupancy must be accompanied with a detailed floor plan of the main structure and site plan showing both existing and proposed structures. Any other information required to enable the City Staff to determine if the plan complies with zoning and building regulations must be submitted for approval.

If the application is denied, the Building Official will provide a plan review detailing the requirements for approval.

Signature of Applicant: _____

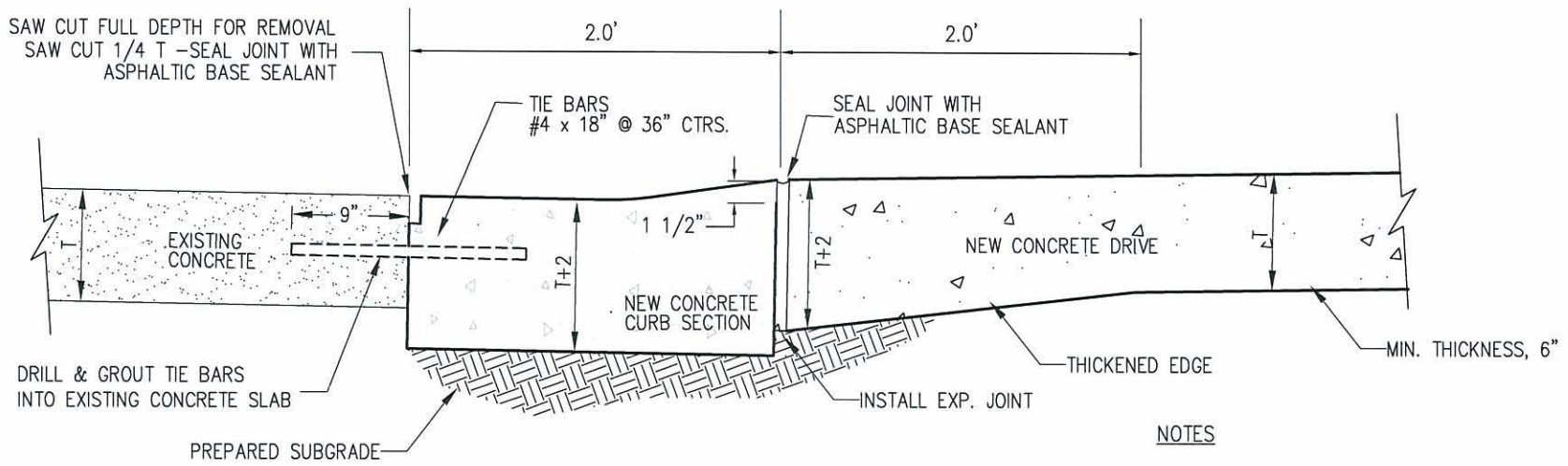
Signature of Building Official upon approval: _____ Date: _____



CURB & GUTTER SECTIONS - REMOVE CURB & GUTTER AS REQUIRED TO FACILITATE THE CONSTRUCTION OF THE DRIVE AND FLARES. REPLACE AS PER CITY OF LEXINGTON DETAILS

INTEGRAL CURB SECTIONS SHALL BE SAW CUT TO FACILITATE THE CONSTRUCTION OF DRIVEWAY AND FLARES AS PER CITY OF LEXINGTON DETAILS.

DRIVEWAY RETURN DETAIL
WITH TERRACE SIDEWALK
NO SCALE



1. CONCRETE MIX DESIGN FOR STREET AND SIDEWALK REPAIR SHALL BE NDOR, TYPE 47B WITH A MAXIMUM SLUMP OF 3 INCHES.
2. REPAIR AREAS SHALL BE INSPECTED BY THE CITY OF LEXINGTON BUILDING INSPECTOR PRIOR TO PLACEMENT OF CONCRETE.
3. CURE TIME SHALL BE MINIMUM 7 DAYS BEFORE OPENING THE REPAIR AREA TO VEHICLE TRAFFIC.

DRIVEWAY RETURN DETAILS

NO SCALE

Office Use Only

Commercial Construction Checklist

- _____ Commercial Building Application
- _____ Is a Change of Occupancy form required?
- _____ Complete Set of Stamped Drawings (if required)
- _____ Is the zoning correct for the project?
- _____ Does the project meet the Comprehensive Plan?
- _____ Will the project fit inside the zoning setbacks?
- _____ Is the project in a high-hazard floodplain? ("A" Zones)
- _____ Is the project over an acre of disturbed ground? Has a SWPPP been submitted to the NDEQ?
- _____ Has a plan been submitted to the State Electrical Division?
- _____ Has the plan been submitted to the NSFMS?
- _____ Does the plan meet the ADA requirements?
- _____ Plan Review completed?