

**APPLICATION FOR ZONING PERMIT
KEITH COUNTY, NEBRASKA
308-284-3556**

Keith County Planning and Zoning Department
511 North Spruce St Room 209
Ogallala, Nebraska 69153

Office Use Only
Fee Paid: _____
Permit No. _____

I.

Applicant Name _____ Phone (hm) _____
Phone (wk) _____

Address: _____
City _____ State _____ Zip _____

Owner Name _____ Phone (hm) _____
Phone (wk) _____

Address: _____
City _____ State _____ Zip _____

II. Property Information

A. Legal Description _____
Lot: _____ Block: _____ Subdivision: _____

III. Improvement Information

Type of Improvement: _____

Set Back: _____ Site Plan: _____

Building Width: _____ Building Length: _____ Total area: _____

Cost of Construction: _____

IV. Contractor

Name: _____ Phone No. _____

Address: _____ City _____ State _____ Zip _____

The undersigned acknowledges that the above information and attached drawings are true and accurate and that false information will negate and invalidate the application and/or the subsequent permit. This permit is not transferable to any other legal description. This permit is valid for one year from the date of issuance.

Signature _____ Date: _____