



Application for

Permit # \_\_\_\_\_

# MISCELLANEOUS FEES PERMIT

Building & Safety Department – City of Lincoln & Lancaster County

555 South 10<sup>th</sup> Street, Suite 208 \* Lincoln, NE 68508-3995 \* LMC Section 2.08.050

Phone # 402.441.7521 \* Fax # 402.441.8214 \* 24 HR Inspection Line 402.441.8413

Job Address: \_\_\_\_\_ Suite #: \_\_\_\_\_

Lot(s): \_\_\_\_\_ Block: \_\_\_\_\_ Subdivision: \_\_\_\_\_

<b>FLOODPLAIN PROCESSING</b> Request for removing property from FEMA identified floodplain  LOMA                  LOMR                  LOMR-F                  CLOMA                  CLOMR	<b>OFFICE USE / FEE SCHEDULE</b>          <b>\$412.00</b>
<b>FARMSTEAD</b>  Farmstead Subdivision (Split-off is over 10 acres)	          <b>\$412.00</b>
<b>MISC. RESEARCH</b> (Not associated with a permit review) Examples:  Field Research/On-site Consultations for Code Assessments On-site Structural Consultation Repetitive Consultation/Research Regarding the Same Topic or Project Replacement of Drawings in Active Permit Sets Underground Storage Tanks Other _____ _____	<b>ESTIMATED FEES:</b> # Hrs. _____ X \$ _____ = \$ _____  <b>ACTUAL FEES:</b> (To be calculated during the review) # Hrs. _____ X \$ _____ = \$ _____ # Hrs. _____ X \$ _____ = \$ _____  <b>MINIMUM DEPOSIT:                  \$ 50.00</b>   <b>FEE TOTAL: _____</b>
Description of work requested: _____ _____ _____	

The undersigned hereby certifies that they have read and examined this application and know the same to be true and correct. All provisions of law and ordinances governing this type of work will be compiled with whether specified or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

The undersigned also hereby agrees to pay all calculated fees.

PRINTED APPLICANT NAME: \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Office Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Applicant Email: \_\_\_\_\_

**BUILDING & SAFETY APPROVAL:** \_\_\_\_\_ **DATE:** \_\_\_\_\_