

## GENERAL BUILDING PERMIT APPLICATION

400 East Military Ave Fremont NE 68025  
402-727-2638 402-727-2659 Fax

www.fremontne.gov

Date \_\_\_\_\_

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

ADDRESS OF PROJECT: \_\_\_\_\_

PROPERTY OWNER Name & Address: \_\_\_\_\_

### DESCRIPTION OF PROJECT:

- SHED:** Size \_\_\_\_\_ Locates Returned?:  Yes  Yes; Made Modifications  
(Plot plan must be included with permit showing shed location and will be sent to other City departments to check on utility lines before a permit will be issued.)
  
- ROOF:** Type of Roof \_\_\_\_\_ Roof Being Replaced \_\_\_\_\_  
Including:  Soffit  Fascia  Gutters
  
- FENCE:** Type of Fence \_\_\_\_\_ Location \_\_\_\_\_  
(Plot plan must be included with permit showing fence location. Possible vision clearances will be verified before permit is issued.)
  
- DECK/PORCH:** Location \_\_\_\_\_ (Must provide plans/drawings and plot plan)
  
- WINDOWS:** How Many? \_\_\_\_\_  Replacement  New U-Value \_\_\_\_\_
  
- DOORS:** How Many? \_\_\_\_\_  Interior  Exterior Type \_\_\_\_\_
  
- SIDING:** Type \_\_\_\_\_ Location (Residence, Shed, Garage) \_\_\_\_\_
  
- OTHER:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TOTAL VALUE OF PROPOSED WORK \$ \_\_\_\_\_ (includes all materials and labor for proposed project.)

PERMIT FEE \$ \_\_\_\_\_

**CONTRACTOR** \_\_\_\_\_

**Phone Number** \_\_\_\_\_ **Email** \_\_\_\_\_

I certify no work will be done except as described above or on accompanying plans. All work will be performed in compliance with all codes and ordinances of the City of Fremont, and inspections requested as outlined on the front side of the yellow permit card. I certify that the above application complies with the ordinances pertaining thereto in the City of Fremont and recommend that a permit be granted.

**Applicant Name** (print clearly) \_\_\_\_\_

**Signature** \_\_\_\_\_