



WINNEBAGO TRIBE OF NEBRASKA
UTILITIES DEPARTMENT

PO BOX 687 WINNEBAGO NE 68071
PH: 402-878-2203 FAX: 402-878-2261

WINNEBAGO TRIBE OF NEBRASKA BUILDING
PERMIT

Permit #:

Type:

Address: _____

Issuance Date: _____

Permit Holder: _____

Approved: _____

Zachary Hansen, Utilities Specialist

Building permit application is on file at the Winnebago Tribal Facilities Department Office along with insurance of permit holder. All information regarding this permit is available for review by request to the Winnebago Tribal Utilities Specialist.

WINNEBAGO TRIBE OF NEBRASKA
APPLICATION FOR PLAN EXAMINATION
AND BUILDING PERMIT

NAME: _____

DATE: _____

ADDRESS: _____

I. **Location of Building:** _____
Between _____ (cross street) and _____ (cross street) Lot _____ Block _____ Lot Size _____

II. **Type and Cost of Building**

A. *Type of Improvement*

- New Building
- Addition
- Moving

<input type="checkbox"/> Alteration <input type="checkbox"/> Wrecking <input type="checkbox"/> Repair, Replacement <input type="checkbox"/> Foundation Only
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B. *Ownership*

- Private (Individual, Corporation, Nonprofit institution, etc.)
- Public (Federal, State or Local Government)

C. *Cost*

Cost of Improvement \$ _____

To be installed but not included in above cost

Electrical \$ _____

Plumbing \$ _____

Heating, Air Conditioning \$ _____

Other (Elevator, etc.) \$ _____

Total Cost of Improvement \$ _____

D. *Proposed Use (for "Wrecking" mark most recent use)*

Residential

- One Family
- Two or More Families
Number of Units _____
- Transient Hotel, Motel
or Dormitory
Number of Units _____
- Garage
- Carport
- Other – Specify

Non Residential

<input type="checkbox"/> Amusement, Recreational <input type="checkbox"/> Church, other Religious <input type="checkbox"/> Industrial <input type="checkbox"/> Service station, Repair Garage <input type="checkbox"/> Institutional <input type="checkbox"/> Office, Bank, Professional <input type="checkbox"/> Public Utility <input type="checkbox"/> School, Library, Educational <input type="checkbox"/> Stores, Mercantile <input type="checkbox"/> Tanks, Towers <input type="checkbox"/> Other – Specify _____ _____
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Non Residential: Describe in detail the proposed use of the buildings:

(Note: ALL COMMERCIAL BUILDINGS MUST COMPLY WITH AMERICAN WITH DISABILITY ACT REGULATIONS – ADA)

III. Selected Characteristic of Building

E. Principal Type of Frame

- Masonry (wall bearing)
- Reinforced Concrete

- | |
|---|
| <input type="checkbox"/> Wood Frame |
| <input type="checkbox"/> Structural Steel |

F. Principal Type of Heating Fuel

- Gas
- Coal
- Oil
- Electricity

G. Type of Sewage Disposal

- Public or Private Company
- Private (well, cistern)

H. Type of Water Supply

- Public or Private Company
- Private (well, cistern)

I. Type of Mechanical

Will there be air conditioning? ___ Yes ___ No

Will there be an elevator? ___ Yes ___ No

J. Dimensions

Height _____

Width _____

Length _____

Total Area, Sq. Ft. _____

K. Residential Buildings Only:

Number of Bedrooms _____

Number of Bathrooms Full _____

 Partial _____

IV. Site or Plot Plan

Please draw in size, shape and placement of building to be constructed in reference to adjoining property lines,

A large grid for drawing a site or plot plan. The grid consists of 20 columns and 20 rows of small squares, providing a scale for drawing the building's size, shape, and placement relative to property lines.