

## **FILLMORE COUNTY APPLICATION FOR CERTIFICATE OF ZONING COMPLIANCE**

For the Villages of Exeter, Fairmont, Grafton, Milligan, Ohioa and Shickley and the rural areas of Fillmore County

Certificate No. \_\_\_\_\_ Application Date: \_\_\_\_\_ PID: \_\_\_\_\_ Card File: \_\_\_\_\_

***Please do not begin work until certificate is approved.***

**Complete application and return to:**

**Zoning Administrator, Shaundee Graham at 1320 G Street, Geneva, NE 68361**

**Contact the Zoning Office at 402.759.4982 with any questions.**

Name of Applicant: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Village: \_\_\_\_\_ Zip: \_\_\_\_\_

Land Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Permit Address: \_\_\_\_\_ Village: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

For Rural Permits:

Part: \_\_\_\_\_ Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_

For Permits within a Village:

Lot/s: \_\_\_\_\_ Block: \_\_\_\_\_ Addition: \_\_\_\_\_

**Individual responsible for Personal Property Tax on Improvement** *(Please check one)*

\_\_\_\_\_ Applicant \_\_\_\_\_ Land Owner \_\_\_\_\_ N/A \_\_\_\_\_ Other

Schedule number if available: \_\_\_\_\_

Please tell us more about the item you are requesting a permit for.

**I would like to** *(circle one)* **ERECT - RELOCATE - REMODEL** a *(circle one)* **NEW or USED** structure.

**Type of Structure:** *(circle all applicable)* **HOUSE GARAGE BUILDING BIN/GRAIN EQ SIGN FENCE**

**OTHER:** \_\_\_\_\_

Type of materials: Frame \_\_\_\_\_ Exterior Finish \_\_\_\_\_

Intended Use: \_\_\_\_\_

Dimensions: Width \_\_\_\_\_ Length \_\_\_\_\_ Height \_\_\_\_\_ Square Footage \_\_\_\_\_

Basement: Yes \_\_\_\_\_ No \_\_\_\_\_ Basement Material: \_\_\_\_\_ (no permit req'd for bldgs. under 100 sq ft.)

Lot Dimensions: Width \_\_\_\_\_ Length \_\_\_\_\_ Square Footage \_\_\_\_\_

Est project cost: \_\_\_\_\_ Est start date: \_\_\_\_\_ Est completion date: \_\_\_\_\_

Contractor Name/Contact Information: \_\_\_\_\_

**Please draw a picture representing the location of the building/structure in relation to existing buildings/structures on the property. An aerial may be obtained by visiting: <http://fillmore.assessor.gisworkshop.com> . Enter your property information in the "Getting Started" tab. Copies of the general guidelines for setback and lot sizes are available upon request. By signing below, the applicant agrees to be in adherence to these regulations.**

## General Requirements for Residential 1 & Residential 2 property:

	Lot Area Sq. Ft.	Lot Width	Required Front Yard	Required Side Yard	Required Rear Yard	Height **
Single Family Dwelling	R-1 7,000 * R-2 5,000 *	50'	25'	7'	20'	35'
Two Family Dwelling	3,750 * per family	25' per family	25' per family	7', 0' off party wall	20'	35'
Accessory Uses			25'	3' ***	3' ***	12'
Other Permitted Uses	7,000 *	45'	25'	7'	20'	12'

\*Excludes road Right of Way

\*\*Measured at ½ of the peak

\*\*\* Increases to 5 feet if adjacent to alley and 16 feet if vehicular access from alley

### Disclaimer:

By signing this application, the applicant hereby certifies that the above statements are true and correct to the best of their knowledge and hereby agrees to comply with the zoning regulations and any other regulations which are in effect. The applicant's signature on this document acknowledges permission for the Zoning Administrator or staff to be on site. Approval of the certificate does not hold the Administrator or Fillmore County liable. If in violation of any zoning regulations through falsifying information or misrepresentation of the facts, this zoning certificate of compliance then becomes null and void, and the applicant may be subject to penalties established. *Additionally, by signing, the applicant certifies that there are no existing easements on the property.*

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

### FOR ZONING OFFICE USE ONLY:

Current Zoning \_\_\_\_\_ Floodplain Verified \_\_\_\_\_ Site Inspection \_\_\_\_\_

New Assigned Address \_\_\_\_\_

Comments \_\_\_\_\_

**This application for a CERTIFICATE OF ZONING COMPLIANCE is**

\_\_\_\_\_ **Approved**                      \_\_\_\_\_ **Denied**

\_\_\_\_\_  
**Signature of Zoning Administrator**

\_\_\_\_\_  
**Date**