



**City of Bonner Springs**  
COMMUNITY DEVELOPMENT

<i>Staff Use Only</i>	
Date Rec'd	_____
By (initials)	_____
Permit Fee \$	_____
Permit #	_____
Issue Date	_____
Expiration Date	_____

**PERMIT APPLICATION**

Project Address: \_\_\_\_\_

Applicant (Company and Contact): \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

Company Address: \_\_\_\_\_

Property Owner Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Type of Permit: \_\_\_\_\_ Value: \_\_\_\_\_ Square Footage: \_\_\_\_\_

Project Description: \_\_\_\_\_

**Submittal Requirements:**

- **Application** – completed, signed, and dated submit by email to [tbarlow@bonnersprings.org](mailto:tbarlow@bonnersprings.org)
- **Project Description** - type of construction; work description (e.g. structural, electrical, plumbing, etc.)
- **Site Plan** – Submit by email to [tbarlow@bonnersprings.org](mailto:tbarlow@bonnersprings.org) with PDF File - refer to Residential New Construction Plot Plan Checklist
- **Building Plans** (Construction Drawings) submit by email to [tbarlow@bonnersprings.org](mailto:tbarlow@bonnersprings.org) with PDF File

All contractors & subcontractors shall have a current occupational license with the City of Bonner Springs.

TRADE	CONTRACTOR	PHONE NO.	CITY OCC. LICENSE #
General			
Electrical			
Mechanical			
Plumbing			

**Zoning District:** \_\_\_\_\_ **Setbacks:** Front \_\_\_\_ Side \_\_\_\_ Rear \_\_\_\_ Located in **Floodplain:** Yes/No

Work in **ROW:** Yes/No **Street Cut:** Yes/No **Earth Change Permit Req'd:** Yes/No

**Neighborhood Revitalization Program (NRP):** Property is or is not (circle one) located in a NRP area. Property owner must ask about eligibility for the NRP. **NRP** application due within 30 days of permit issue date.

*The applicant and owner herein certify that the information contained in this application is true and correct and further agree to comply with the regulations for the City of Bonner Springs, Kansas as amended, and all other pertinent ordinances or resolutions of the city and statutes of the State of Kansas. It is also agreed that all city fees shall be assumed and paid by the applicant/owner.*

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

**Questions?** Contact: Terry Barlow ~ 913-667-1710 ~ 8:30am – 12:30pm ~ Mon – Fri

**NOTE: Permits expire six (6) months from issue date.**