



Anderson County Planning Office
 Thomas R. Young, Planning Director
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 Garnett, Kansas 66032 785-448-3724
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APPLICATION FOR OTHER STRUCTURES

Permit # _____

Property Owner's Name: _____

Applicant (If different from Owner): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ Phone #: _____

Contractor: _____ Location of Bldg. Site: _____

Acreage: _____ Section: _____ Township: _____ Range: _____

General description of structure to be built: _____

Size of structure: Width: _____ Length: _____ Total Square Footage: _____

Describe intended use of structure: _____

Describe present use of land 250 ft. of any boundary: _____

Will structure require sanitation facilities: _____ If yes, explain: _____

I, _____, hereby certify that the information provided herein is true and correct and that all zoning regulations shall be complied. I further understand any permit based upon false or incorrect statements of fact material to the issuance of the permit shall be void.

Signature: _____ Date: _____

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED. FEES AND DEPOSIT MUST BE PAID AT THE TIME APPLICATION IS FILED. I ALSO CERTIFY THAT THE DESCRIBED IMPROVEMENT SHALL COMPLY WITH ALL ZONING REGULATIONS.

OFFICE USE ONLY		
_____ Site Plan	_____ Sanitation Permit	_____ Receipt #
_____ Entrance Permit	_____ Copy of Deed	_____ Fees Paid
Assigned 911 address: _____		