

NEW HOME PERMIT APPLICATION

City of Hays
 Planning & Development
 1002 Vine St.
 Hays, Kansas 67601
 (785) 628-7310
 (785) 628-7352 fax



Application Date: _____
 Site Plan
 Building Drawings
 Window Schedule
 Truss Package/Bracing
 Plumbing Drawing and Fixture Schedule
 Stormwater Drainage Permit Application
 Stormwater Site Plan
 Water Utility Application

2015 IRC & IFC, 2014 NEC, 2009 UMC & UPC
 2012 Green Plumbing & Mechanical Code Supplement
 (with amendments)

Property Information

Street Address	Apt	Zip
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Owner Information

First Name	Last Name	Phone	
Street Address (Leave blank if same as above)		City	State

Contractors Information

	Name	Mailing address	Phone
Applicant (not owner)			
General			
Email Address		State Registration Roofing #	
Concrete/Foundation			
Email Address			
Structural			
Email Address			
Roofing			
Email Address		State Registration Roofing #	
Electrical			
Email Address			
Plumbing			
Email Address			
Mechanical			
Email Address			
Architect			
Email Address			

Construction Information

Type of Improvement	(Sq Ft)	First floor	Second floor	Basement (finished)	Basement (unfinished)	Garage	Total Sq. Ft.	Crawl Space	Located in Flood Zone	(Finished)
_____ New Single Family Dwelling	_____	_____	_____	_____	_____	_____	_____	_____	<input type="checkbox"/> Y <input type="checkbox"/> N	_____ # of Bedrooms
_____ New Duplex	_____	_____	_____	_____	_____	_____	_____	_____		_____ # of Full Baths
_____ Detached Structure/Garage	_____	_____	_____	_____	_____	_____	_____	_____		_____ # of 1/2 Baths
_____ Addition/Remodel	_____	_____	_____	_____	_____	_____	_____	_____		_____ Total # of Plumbing Fixtures
_____ Egress Windows	_____	_____	_____	_____	_____	_____	_____	_____		_____ Basement Wall Height
_____ Deck	_____	_____	_____	_____	_____	_____	_____	_____		_____ Gas Fire Place
_____ Swimming Pool	_____	_____	_____	_____	_____	_____	_____	_____		_____ Wood Burning Fire Place
_____ Foundation Repair	_____	_____	_____	_____	_____	_____	_____	_____		_____ Commencement Date
_____ Other	_____	_____	_____	_____	_____	_____	_____	_____		_____ Expected Completion Date
Water Meter Size (circle one)	5/8" 3/4" 1"									_____ \$ Estimated Cost of Project

Project Description:

(Please include a detailed description for all general construction, mechanical, electrical & plumbing work being performed)

Mechanical:

Plumbing:

Electrical:

Neighborhood Revitalization Program

(Must select one of the following)

_____ My property is not within the Neighborhood Revitalization District Boundry

_____ My property is within the Neighborhood Revitalization District Boundry but I wish to decline/do not qualify

_____ My property is within the Neighborhood Revitalization District Boundry and I wish to participate.
(If you are wanting to participate you will have to apply for the program within 60 days from the building permit approval)

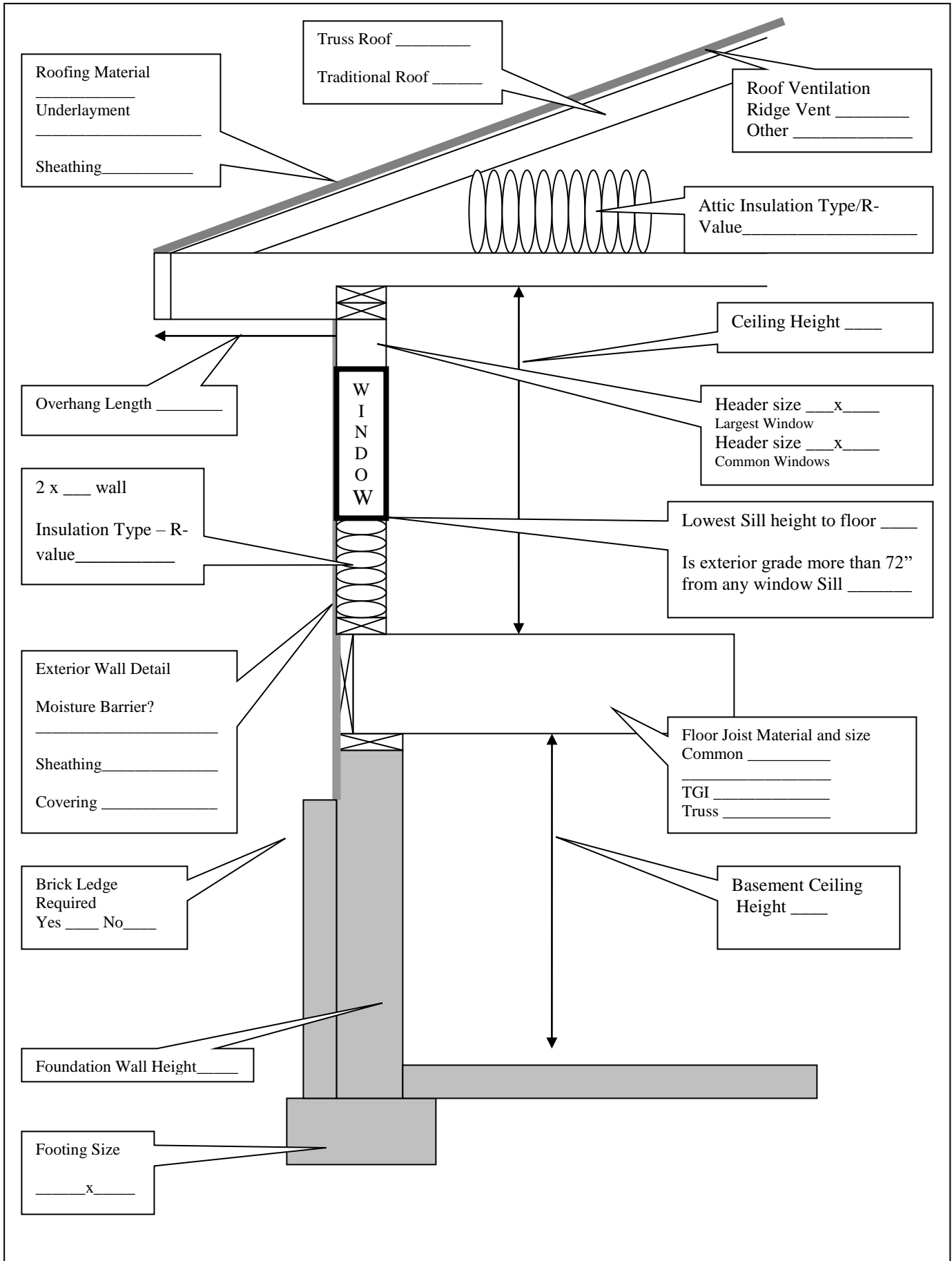
Stormwater Drainage Permit

When determined to be applicable, any person proposing to construct buildings, develop land, grade land, make improvement to existing buildings or land, or take any action that causes a change in existing stormwater runoff, shall also consider this application a Drainage Permit application. No land shall be graded, developed, or improvements constructed upon until the acceptance of any required Stormwater Management Plan and/or Stormwater Pollution Prevention Plan; and issuance of a Drainage Permit by the Stormwater Superintendent. When applicable, the Drainage Permit Fee is \$25.

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of the record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of the jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

Signature of Applicant	Phone Number	Date
Responsible person in charge of work, Title		Phone Number
Email		

CITY OF HAYS RESIDENTIAL PLAN REQUIREMENTS



Please See Reverse Side

CITY OF HAYS RESIDENTIAL PLAN REQUIREMENTS

If plans do not show information below complete the following:

Floor system:

1. Identify cantilevers and dimensions.
2. Identify Floor Crawlspace access and size if required.
3. Identify unfinished areas, total sq ft unfinished, and how bottom of engineered floor joists will be protected.

Wall Construction:

1. Identify windows that require safety glazing
2. Garage door wall length _____
3. Garage door opening and header size _____ 18 ft max
4. Provide dimensions of garage door(s) and dimension to the corner or edge of building. _____
5. Tallest framed wall height _____

Roof/Ceiling Construction:

1. If not using trusses – show/describe size of lumber and span of rafters, ceiling joists and identify direct load paths.

2. Identify attic access location and size _____
3. Will any attic space be used for storage? _____ If yes, where _____

Energy Requirements:

1. Insulation type and R – Value
 - a. Foundation (when finished) – _____ - Minimum – R-13
 - b. Crawlspace - _____ - Minimum – R-10
 - c. Framed Walls - _____ - Minimum – R 13
 - d. Ceiling/Attic Space _____ - Minimum – R-38
 - e. Floor _____ - Minimum – R 30
2. Whole House Ventilation Rate(CFM)
 - a. Conditioned space calculated. – Circle CFM

Floor Area Sq Ft	# of bedrooms		
	1	2-3	4-5
< 1500	30	45	60
1501 – 3000	45	60	75
3001-4500	60	75	90
4501 – 6000	75	90	105

3. How do you plan to accommodate for mechanical ventilation.
 - a. _____ Heat Recovery Unit
 - b. _____ Energy Recovery Unit
 - c. _____ Continuous Exhaust fan along with exterior vent to return duct with damper
 - d. _____ Other designed method – Submittal required
4. Under floor/Crawl space requirements
 - a. _____ Vented Crawlspace
 - i. _____ How many vents
 - b. Unvented Crawlspace
 - i. _____ Type of Insulation on walls
 - ii. _____ Continuous mechanical ventilation with air transfer grill (show location)
 - iii. _____ Conditioned air supply with air transfer gill (show location)

UTILITY APPLICATION FOR WATER, SEWER, SANITATION SERVICES

THIS FORM MUST BE COMPLETED AND RETURNED TO OUR OFFICE WHEN REQUESTING UTILITY SERVICE ALONG WITH THE REQUIRED DEPOSIT. DEPOSITS CAN BE PAID WITH CREDIT/DEBIT CARDS, CHECK, OR CASH. APPLICANTS MUST INCLUDE OR SHOW A COPY OF DRIVERS LICENSE OR OTHER VALID PHOTO IDENTIFICATION. IF THIS FORM IS NOT COMPLETED AND RETURNED, WATER SERVICE WILL NOT BE CONNECTED.

LAST NAME OR BUSINESS NAME	FIRST	MIDDLE INITIAL	MAIDEN
_____	_____	_____	_____

Service Address: _____

Mailing Address (if different): _____

Driver's License #: _____ Federal Identification No. _____

Social Security #: _____

Home Phone: _____ Cell Phone: _____

Circle one: OWN RENT Start Service Date : _____

**Signing this form acknowledges that current water service may be disconnected for non payment of any outstanding bills for any account you may have with the City of Hays. Water service will not be reconnected until the delinquent balances are paid.

SIGNATURES: _____ **DATE:** _____

OFFICE USE: ACCOUNT NUMBER _____ DEPOSIT PD \$ _____ DATE PAID _____

OTHER INFO: _____

CLERK'S INITIALS: _____

Plan Requirements for Plumbing

In accordance with the 2009 UPC and 2012 Green Plumbing and Mechanical Code Supplement

Below is a list of requirements necessary to complete a review of plumbing systems. Please read the following carefully to ensure you provide all required information to minimize delays in the plan review and permit issue process.

New Construction: Plans shall show

1. Meter Size for supply
2. Building supply Size
3. Floor Plan:
 - a. Must show locations of all fixtures including for future (any potential fixtures, unfinished basements layout, etc.)
 - b. Location of Water heater
 - c. Distance from water heater to furthest fixture - 64 ounces MAX volume from Water heater to furthest fixture. (50' of ½" PEX)
 - d. Drawing of waterlines to all fixtures –
 - i. Indicate style and type (Re-circulating, Branch, Zoned, Manabloc system)
 - ii. For re-circulating systems show the following: 16 ounces MAX volume from re-circulating line (12' of ½" PEX)
 1. Type of pump
 2. Pump control – Time clock, Temp sensors
 3. Distance of branch from re-circulating line
 - e. Waste and Vent Riser diagram
 - i. Shall indicate specific fixtures such as Backwater device.
 - f. Size of bath/shower in sq inches.
4. Fixture Specifications:
 - a. A list of fixtures and appurtenances that are connected to the potable distribution system or that discharge to the sanitary waste system. The list must include manufacturer and model number of each plumbing fixture or appurtenance. These fixtures shall meet the Water Sense and Energy Star Standards as described in the 2012 Green Plumbing & Mechanical Supplemental. (list on back of page)



Please See Reverse Side

For Additions and /or Remodeling:

1. Floor Plan
 - a. Must show the locations of all new plumbing fixtures.
 - b. Location of water heater
 - c. Show the distance from water heater to new fixtures.
 - d. Drawing of waterlines to all new fixtures –
 - i. Indicate style and type of existing system (Re-circulating, Branch, Zoned, Manabloc system) 64 ounces MAX volume from water heater to furthest fixture
 - ii. For re-circulating systems show the following: 16 ounces max volume from re-circulating line (12' of ½" PEX)
 1. Type of pump
 2. Pump control – Time clock, Temp sensors
 3. Distance of branch from re-circulating line
 - e. Waste and Vent Riser diagram of new system
2. Material Specifications:
 - a. A list of fixtures and appurtenances that are connected to the potable distribution system or that discharge to the sanitary waste system. The list must include manufacturer and model number of each plumbing fixture or appurtenance. These fixtures shall meet the Water Sense and Energy Star Standards as described in the 2012 Green Plumbing & Mechanical Supplemental. (as shown below)

Shower head	2.0 GPM
Kitchen Faucet	1.8 GPM
Residential Lavatory	1.5 GPM
Toilet	1.28 GPF
Dishwasher	Energy Star
Clothes Washer	Energy Star
Water Softener	Regenerate by demand only

* Whirlpool bathtubs or bath tubs with no shower head are exempt.



CITY OF HAYS

Certificate of Occupancy Information & Inspection Checklist

The purpose of this checklist is to inform the homeowner, contractors, and possible occupants of the required inspections and that final inspections must be conducted and approved before occupancy and/or conducting business. If all life safety items are completed moving in supplies and other residential/business related items may be allowed. If approved a temporary certificate of occupancy will be issued. You will have 30 days from the date on the temporary certificate of occupancy to complete all items on the punch list. A certificate of occupancy will be issued once all punch list items are completed.

The chief building official is authorized to suspend water service to a building or structure if inspections are not called for, if all code requirements have not been met, or if the certificate of occupancy is not obtained prior to occupancy of the structure. (City Ordinance 11-76).

Final inspections must be scheduled at least 1 week in advance of wanting to occupy the structure. Failure to do so may cause a delay in occupancy.

IT IS THE RESPONSIBILITY OF THE CONTRACTOR TO CALL FOR AND BE PRESENT FOR ALL INSPECTIONS. PLEASE CALL 785-628-7310 TO SCHEDULE ALL INSPECTIONS.

Inspection Checklist
Do not dig footings or foundation, the following inspections have been performed.
Stormwater Site inspection
Building Site inspection
Do not pour footing or foundation concrete until the following inspections have been performed.
Footing inspection; Main Structure, Garage & Covered Patio
Foundation Wall inspection; Main Structure & Garage
Do not cover work or pour floor/slab concrete until the following inspection has been performed.
Plumbing (underground)
Do not insulate or install wall covering until the following inspections have been performed.
Rough Framing
Rough Electrical
Rough Plumbing
Rough Gas Piping
Rough Heating, AC and Ventilation
Do not backfill or cover utility lines until the following inspections have been performed.
Sewer Tap
Water Service
Do not tape or paint wall covering (sheetrock) until the following inspection has been performed.
Sheetrock inspection
Do not call Midwest Energy for service until the following inspections have been performed.
Gas Pressure Test
Electrical Service Inspection
Do not move furniture into/occupy the structure until the following inspections have been performed & approved.
Final Building Inspection
Final Stormwater Inspection
Termite Treatment Completed
Blower Door Test Completed

IMPORTANT

Structure cannot be occupied until a Temporary Certificate of Occupancy Or Certificate of Occupancy has been issued.