



Building & Zoning Department
215 S. Broadway, Louisburg, KS 66053
913-837-5811 · louisburgkansas.gov
rwhitham@louisburgkansas.gov

FINISHED BASEMENT

Permit Fee:

- Depends on square footage.
- Value \$20.18/square foot.
- Permit cost is \$69.25 for first \$2,000 and \$14 for each additional \$1,000.

Items Required for Permit:

- Application.
- Drawing of finished basement.
- Property deed.

Requirements:

- Construction per 2003 IRC.
- Bedrooms must have 5.7 sq. ft. open area egress window (5.0 sq. ft. if at grade level).
- Licensed contractor(s).

Inspections:

- Rough-in.
- Egress.
- Combustion Air.
- Smoke Detectors/Hard Wired.
- Ceiling Height.
- Stairs.
- Final.



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APPLICATION FOR ADDITIONS

Date: _____ Permit # _____

Applicant Name: _____

Property Owner: _____

Property Owner Address: _____ Phone: _____

Contractor: (Must be Licensed in Miami County) Circle type of contractor: General / Mechanical / Foundation / Roofing
Electrical / Plumbing / Site Utility / Fire Sprinkler / Irrigation

Contractor Name: _____

Contractor Address: _____

Contractor Phone: _____

Legal description of building site: (attach copy of deed).

Describe proposed work to be done: _____

Estimated cost of new construction: _____

Size of structure: Width _____ Length _____ Total square footage _____

Describe present use of existing structure: _____

Will structure require sanitary facilities: _____ If yes, please explain: _____

I, _____, hereby certify that the information provided herein is true and correct and that all Zoning Regulations shall be complied with. I certify that all contractors listed above are licensed under the Miami County, Kansas, Contractor Licensing Code. I further understand that any permit based upon false or incorrect statements of a material fact necessary to the issuance of the permit, shall be void.

Date: _____ Signature: _____

Office Use Only

ATTACHED:

_____ Copy of Deed	_____ Entrance Permit	_____ Date Paid
_____ Site Plan	_____ Sanitation Permit	_____ Receipt #
_____ Building Plans	_____ Amount Due	

Assigned address: _____