



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

COMMERCIAL (TENANT FINISH) PERMIT APPLICATION

1. Building Permit Application: Completed *Application for Other Structures* shall be submitted.
2. Four (4) Sets of Building Plans: Plans shall have a seal from a design professional and shall be designed in accordance with 2018 International Building Codes as adopted by the City of Louisburg. One set of plans will be returned with the building permit. This set should be kept on the job site during construction.
3. Four (4) Sets of Sprinkler Plans: One set of plans will be returned with the building permit. This set should be kept on the job site during construction.

Inspections:

1. Rough Inspection (including):
 - Electrical
 - Plumbing
 - Mechanical
 - Structural
2. Sprinkler Inspection
3. Gas Pressure Inspection (Interior)
4. Overhead Ceiling Inspection
5. Hood Inspection (Restaurants Only)
6. Final Inspection



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The following inspections are required on all new construction:

The building permit must be posted at the job site.

- 1. Rough-In Inspection:** Inspection includes plumbing, electrical, mechanical, and the framing of the structure. Inspection is required prior to the installation of any insulation or sheet rock.
- 2. Electrical:** Electrical service inspection shall be done when meter base or disconnected is set, and the underground or overhead has been run.
- 3. Gas:** Gas inspection pressure test at 10 psi for 15 minutes.
- 4. Fire Sprinklers:** Submit four (4) copies of plans for review prior to installation. Test sprinkler system upon completion of installation.
- 5. Fire Hood:** Contact Louisburg Fire Chief at 913-837-4700 for inspection.
- 6. Other Inspections:** Other inspections as required for the specific project.
- 7. Final Inspection:** A Certificate of Occupancy may be issued upon completion of the project. A temporary Certificate of Occupancy may be issued if there are items not completed that are not life safety issues. Cost is \$2,000 for 90 days (\$1,750 refundable upon Final Inspection).

It is the responsibility of the contractor to call for inspections and to verify they are completed before any work progresses. To schedule an inspection, call the Building & Zoning Department at 913-837-5811 and leave the following information:

- Site Address
- Contractor's Name
- Type of Inspection
- Permit Number
- Contact Name and Phone Number



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APPLICATION FOR OTHER STRUCTURES

If you live in a HOA, you must receive HOA permission.

Date: _____ Permit # _____

Property Owner: _____

Property Owner Address: _____ Phone: _____

Contractor: (Must be Licensed in Miami County)

Contractor Name: _____

Contractor Phone: _____ Email: _____

General: _____ Mechanical: _____

Electrical: _____ Plumbing: _____

Foundation: _____ Site Utility: _____

Roofing: _____ Fire Sprinkler: _____

Description of structure to be constructed: _____

Estimated cost of new construction: _____

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

Intended use of structure: _____

Principal material to be used in construction: _____

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:

_____ Site Plan _____ Building Plans _____ Date Paid

_____ Amount Due _____ Receipt #

Assigned address: _____



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Natural Gas Requirements

Name: _____

Meter Address: _____

Type of Units	BTU each	Comments
Furnace 1:	_____	
Furnace 2:	_____	
Water Heater 1:	_____	
Water Heater 2:	_____	
Fireplace:	_____	
Cooktop:	_____	
Grill:	_____	
Generator:	_____	
Other:	_____	
Other:	_____	
Other:	_____	
TOTAL BTUs		

Name: _____

Signature: _____ Date: _____



Office of Utilities
215 S. Broadway, Louisburg, KS 66053
913-837-5371 · louisburgkansas.gov

Application for Gas and/or Water Service for the Builder

Date: _____

Do you want: Gas: _____ Water: _____

Builder Name: _____

Mailing Address: _____

Contact Name: _____

Contact Phone: _____ Email: _____

Address for service: _____

Lot # _____ Subdivision: _____