



SIDEWALK PERMIT

City of Ellis

815 Jefferson St.

Ellis, KS 67637

Public Work's Department -(785) 726-1741

Clerk's Department - (785) 726-4812

LOCATION OF CONSTRUCTION: _____

| | | | | | |
|----------------------|--|----------------------------------|--|--------------|--|
| CONSTRUCTION COST \$ | | EXISTING DRIVEWAY | | NEW DRIVEWAY | |
| | | LENGTH OF DRIVEWAY THRU SIDEWALK | | | |
| | | WIDTH OF DRIVEWAY THRU SIDEWALK | | | |
| | | LENGTH OF SIDEWALK | | | |
| | | WIDTH OF SIDEWALK | | | |
| | | ESTIMATE TOTAL SQ. FT. | | | |

REGULATIONS

(Unless otherwise directed by the Inspection Department)

CROSS SLOPE DOES NOT EXCEED 2% (1/4" per ft)
RAMP SLOPE DOES NOT EXCEED 8.3% (1" per ft) for sidewalks
REMOVAL OF CONCRETE TO NEAREST JOINT IS REQUIRED
ALL WORK COMPLETED WILL COMPLY WITH CITY CODE
ALL CONCRETE TO BE POURED IS TO MEET ADA REGULATIONS

Contractors Information

| | Name | Mailing address | Phone |
|------------|------|-----------------|-------|
| Owner | | | |
| Contractor | | | |

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/her 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: |
| X | |
| Responsible person in charge of work, Title | Phone Number: |
| X | |
| Email: | |

NOTES: CITY SPECIFICATIONS FOR SIDEWALKS AND DRIVEWAY ENTRANCES ARE AVAILABLE UPON REQUEST.
ALL WORK IS TO BE INSPECTED BEFORE CONCRETE IS POURED.

OFFICE USE ONLY:

PERMIT FEES:

Sidewalk Permit Fee: \$ _____

Inspection Fees:

(NO. _____ X _____) = \$ _____

Total Fees: \$ _____ Date Paid: _____ Receipt #: _____

Public Works Department: (785) 726-1741 | Police Department Non-Emergency: (785) 625-1011 | Clerk's Office: (785) 726-4812
815 Jefferson, Ellis KS 67637