



# Extra Territorial Zones

New Building Address: \_\_\_\_\_ Zoning District: \_\_\_\_\_ Date: \_\_\_\_\_

Legal Description: Lots(s) \_\_\_\_\_ Block: \_\_\_\_\_ Subdivision: \_\_\_\_\_

County Legal Description (i.e. copy of deed): \_\_\_\_\_

Section \_\_\_\_\_ Twp. \_\_\_\_\_ Range \_\_\_\_\_

Name of Landowner: \_\_\_\_\_ Phone: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_ Phone: \_\_\_\_\_

Address of Applicant: \_\_\_\_\_

### Use of Structure:

Residential: \_\_\_\_\_ Commercial: \_\_\_\_\_ Accessory: \_\_\_\_\_ Other: \_\_\_\_\_

( ) New construction ( ) Relocation ( ) Other \_\_\_\_\_

### Method of Construction (Check One)

Manufactured Home: \_\_\_ Site Built Home \_\_\_, Modular Home, \_\_\_, \*Mobile Home \_\_\_,

Residential-Design Manufactured Home \_\_\_\_.

### **\*Mobile Home: For Definition See K.S. A. 58-4202 (b).**

If Mobile Home please complete the following: Make or Model \_\_\_\_\_, Length \_\_\_\_\_, Width \_\_\_\_\_, Year \_\_\_\_\_.

To be occupied by: Property Owner \_\_\_, Relative \_\_\_, Employee \_\_\_,

Other (explain):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**List all Square Footages**

Square foot of: 1<sup>st</sup> floor: \_\_\_\_\_ 2<sup>nd</sup> floor: \_\_\_\_\_ Basement: \_\_\_\_\_ Garage: \_\_\_\_\_

Accessory: \_\_\_\_\_

**Total Number (all Floors)**

Bedrooms: \_\_\_\_\_ Bathrooms: \_\_\_\_\_

**Utilities:**

**Gas:** Propane: \_\_\_\_\_ Natural: \_\_\_\_\_

**Water:** Rural: \_\_\_\_\_ Well: \_\_\_\_\_ City: \_\_\_\_\_

**Electric:** Bluestem: \_\_\_\_\_ KPL: \_\_\_\_\_ Other: \_\_\_\_\_

**Wastewater:** Septic: \_\_\_\_\_ Lagoon: \_\_\_\_\_ Other: \_\_\_\_\_

**Estimated Cost of Construction:** \_\_\_\_\_ **Estimated Market Value:** \_\_\_\_\_

**Starting date:** \_\_\_/\_\_\_/\_\_\_ **Estimated completion date:** \_\_\_/\_\_\_/\_\_\_

I hereby acknowledge that the information presented is correct and that the project will comply with all applicable zoning regulations of the City of St. Marys and Sanitary Code Regulations of Pottawatomie County. It is further understood that compliance with applicable ordinances is my responsibility as Landowner/Applicant.

\_\_\_\_\_  
(Signature of Applicant/ Date)