



R-1 Zoning District (ETJ)

Detached Accessory Building

PERMIT # \_\_\_\_\_

115 Locust Street  
 P.O. Box 127  
 Hickman, NE 68372-0127  
 Phone 402.792.2212  
 Fax 402.792.2210  
 www.hickman.ne.gov

Application is *not* approved until permit number is issued and paid for. Do *not* begin construction until then.

Property Owner(s) \_\_\_\_\_ Phone # (\_\_\_\_) \_\_\_\_\_

Street Address: \_\_\_\_\_

Legal: Block \_\_\_\_\_ Lot \_\_\_\_\_ Addition \_\_\_\_\_ City, State \_\_\_\_\_

Contractor: \_\_\_\_\_ Phone # (\_\_\_\_) \_\_\_\_\_

Contractor Address: \_\_\_\_\_ Total Square Footage: \_\_\_\_\_

**APPLICATION REQUIREMENT ITEMS**

- Completed Application Form     
  Construction Design (2 copies)     
  Site Plan (2 copies)     
  Permit Fee Payment  
 Electrical Permit (if needed)     
  Plumbing Permit (if needed)     
  Mechanical Permit (if needed)

**Site Plan should include:**

- North arrow
- Address
- Property lines and easements
- Measured distances of proposed building to the rear property line, side property line, the house, and any other structures in the back yard.
- Location of any existing or proposed changes in grade to level a sloping yard for building placement.

**Design:**

- Total square footage of building
- Description of windows, doors, and exits
- Description of framing, trusses, bolts and ventilation
- Description of foundation and footings

**Zoning Regulations (for R-1 Zoning District):** check with the City Office is you are unsure of your zone.

- Height of accessory building in the R-1 District not more than 25 feet
- 10 feet apart from any other accessory structure and principal structure
- 50 feet front yard setback (corner lots have two front yard setbacks)
- 10 feet from rear property line
- 8 feet from side property line
- Single accessory structure maximum lot coverage 10% of total lot ft<sup>2</sup>
- Combined rear lot coverage by accessory structures not to exceed 30% of the rear yard
- Combined lot coverage of all buildings, including principal structure, does not exceed 30% of total lot square footage

**OFFICE USE ONLY**

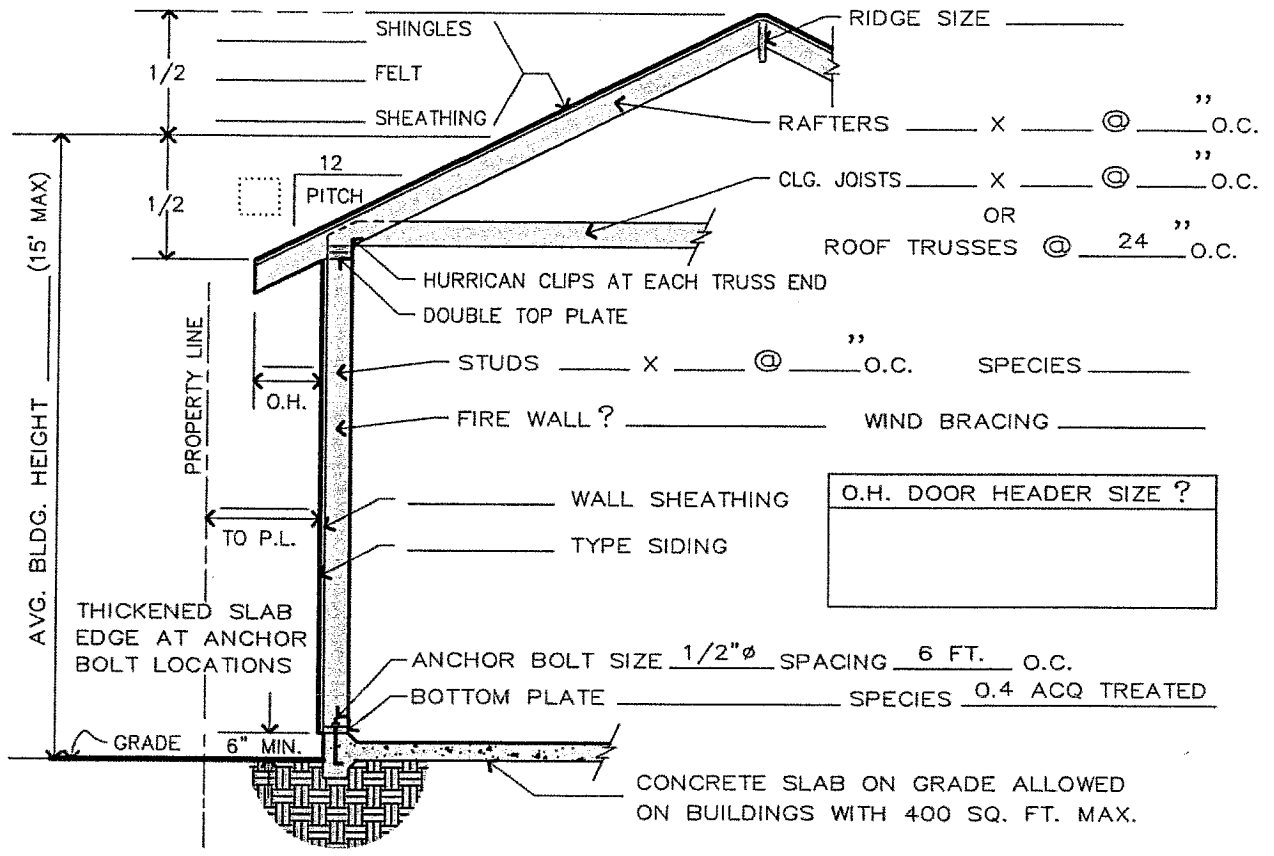
Permit Fee	\$ _____
Plan Review	\$50.00 _____
Foundation	\$40.00 _____
Framing Rough-In	\$40.00 _____
Final Building	\$40.00 _____
Electrical Temporary	\$40.00 _____
Electrical Rough-In	\$40.00 _____
Electrical Final	\$40.00 _____
HVAC Groundwork	\$40.00 _____
HVAC Rough-In	\$40.00 _____
HVAC Final	\$40.00 _____
Plumbing Groundwork	\$40.00 _____
Plumbing Rough-In	\$40.00 _____
Plumbing Final	\$40.00 _____
<b>Fee &amp; Inspection Total</b>	<b>\$ _____</b>
<b>Check #</b>	_____

THE UNDERSIGNED HERBY CERTIFIES that they have read and examined this application and know the same to be true and correct. All provisions of law and ordinances governing this type of work will be complied with whether specified or not. The granting of a permit does not presume to give authority to violate or cancel the provision of any other state or local law regulatinq construction or the performance of construction.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

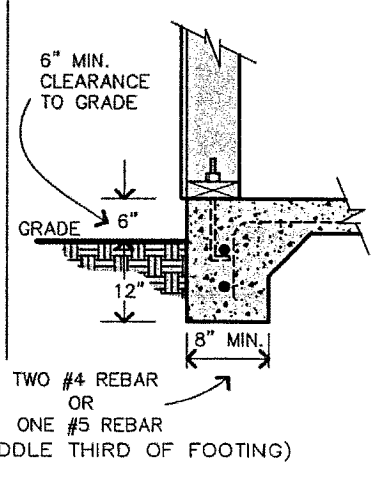
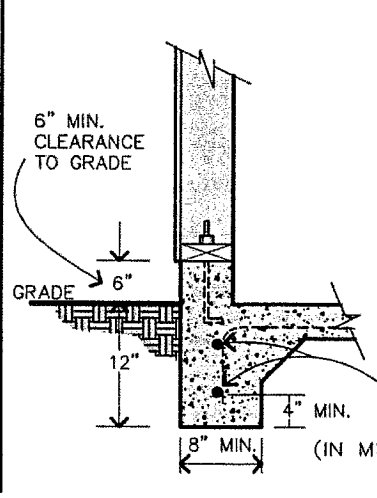
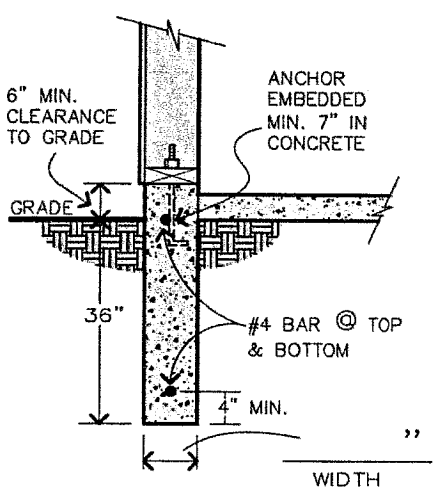
Plan Approved by \_\_\_\_\_ Date \_\_\_\_\_ Permit Approved by \_\_\_\_\_ Date \_\_\_\_\_

**DETACHED ACCESSORY BUILDING**



**FROST - FREE FOOTING •**  
\* FOR BUILDINGS OVER 400 SQ. FT.

**• MONOLITHIC SLAB •** Grade must be relatively level  
OPTIONAL FOR BUILDINGS LESS THAN 500 SQ. FT.





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**ELECTRICAL PERMIT # \_\_\_\_\_**

Date of Permit Application: \_\_\_\_\_

Job Address: \_\_\_\_\_

Description of work to be done: \_\_\_\_\_

Cost Valuation of Job: \$ \_\_\_\_\_ (only if separate from a new building permit)

Property Owner's Name: \_\_\_\_\_

Electrical Company Name: \_\_\_\_\_

Electrical Company Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone #: \_\_\_\_\_

Electrician's Name: \_\_\_\_\_ (if different from Contact Person)

**State Law requires all Electrical Installation shall meet or exceed the  
2017 National Electrical Code.**

The Electrician making the installation must have a copy of a **Master Electrical License** and **Proof of Insurance** attached or on file with the City of Hickman.

\_\_\_\_\_  
Applicant (Printed Name) Signature Date

\_\_\_\_\_  
City Official (Printed Name) Signature Date

*Office Use Only*

**If separate from Building Permit Application then:**

Inspection Fee(s) # \_\_\_\_\_ x \$40.00 = \$ \_\_\_\_\_

Permit Fee \$50.00 if valuation < \$9,000.00 = \$ \_\_\_\_\_

**OR** If valuation > \$9,000.00 the Permit Fee \$50.00 + \$1.035 per \$1,000.00 valuation = \$ \_\_\_\_\_

Total = \$ \_\_\_\_\_

Receipt # \_\_\_\_\_

**Contact Ray Paulson 402.416.8899 for Electrical Inspections**



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**MECHANICAL (HVAC) PERMIT # \_\_\_\_\_**

Date of Permit Application: \_\_\_\_\_

Job Address: \_\_\_\_\_

Description of work to be done: \_\_\_\_\_

Cost Valuation of Job: \$ \_\_\_\_\_ (only if separate from a new building permit)

Property Owner's Name: \_\_\_\_\_

HVAC Company Name: \_\_\_\_\_

HVAC Company Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone #: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

Applicant (Printed Name) Signature Date

City Official (Printed Name) Signature Date

*Office Use Only*

**If separate from Building Permit Application than:**

Inspection Fee(s) # \_\_\_\_\_ x \$40.00 = \$ \_\_\_\_\_

Permit Fee \$50.00 if valuation < \$9,000.00 = \$ \_\_\_\_\_

OR If valuation > \$9,000.00 the Permit Fee \$50.00 + \$1.035 per \$1,000.00 valuation = \$ \_\_\_\_\_

Total = \$ \_\_\_\_\_

Receipt # \_\_\_\_\_

**Contact Mark Howard 402.304.9135 for HVAC Inspections**



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## PLUMBING PERMIT # \_\_\_\_\_

Date of Permit Application: \_\_\_\_\_

Job Address: \_\_\_\_\_

Description of work to be done: \_\_\_\_\_

Cost Valuation of Job: \$ \_\_\_\_\_ (only if separate from a new building permit)

Property Owner's Name: \_\_\_\_\_

Plumbing Company Name: \_\_\_\_\_

Plumbing Company Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone #: (\_\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

\_\_\_\_\_  
Applicant (Printed Name) Signature Date

\_\_\_\_\_  
City Official (Printed Name) Signature Date

*Office Use Only*

**If separate from Building Permit Application than:**

Inspection Fee(s) # \_\_\_\_\_ x \$40.00 = \$ \_\_\_\_\_

Permit Fee \$50.00 if valuation < \$9,000.00 = \$ \_\_\_\_\_

OR If valuation > \$9,000.00 the Permit Fee \$50.00 + \$1.035 per \$1,000.00 valuation = \$ \_\_\_\_\_

Total = \$ \_\_\_\_\_

Receipt # \_\_\_\_\_

**Contact Jeff Kreifels at 402.613.0275 for Plumbing Inspections**

# HICKMAN ZONING REGULATIONS

## R-1 Residential Estates District Section 5.06.06 The height and minimum lot requirements shall be as follows:

Use	Lot Area (sq ft)	Lot Width (feet)	Front Yard (feet)	Side Yard (feet)	Rear Yard (feet)	Maximum Height (feet)	Maximum Lot Coverage
Residential Dwelling	20,000 (4)	80	35	15	30 (2)	35	20%
Other Permitted Uses	20,000 (4)	80	35	15	30 (2)	65	20%
Conditional Uses	20,000 (4)	80	35	15	30 (2)	65	20%
Accessory Uses/Structures	-	-	50	8	10	25	10% (1)

1. Provided the total lot coverage of all buildings does not exceed 30%.
2. See Section 4.09.07 of this Ordinance.
3. On Corner Lots the following criteria apply to setbacks. In existing developed areas, the Street Side Yard setback may conform to existing setbacks along that street. In new developments, the Street Side Yard setback shall be equal to the Front Yard setback.
4. Where individual wells and on-site waste treatment systems are used, the minimum lot area will be three acres. Where central water and/or central sanitary sewer are constructed then the minimum lot area is 20,000 sq ft.

## R-2 Medium Density Residential 5.07.06 The height and minimum lot requirements shall be as follows:

USE	Lot Area (sq. ft.)	Lot Width (feet)	Front Yard (feet)	Side Yard (feet)	Rear Yard (feet)	Max Height (feet)	Max Lot Coverage
Single Family Detached Residential (existing development) <sup>7</sup>	5,000	50	25	6	20 or 20% whichever is less (3)	35	30%
Single Family Detached Residential (future development) <sup>8</sup> Baylor Heights	7,200	70	25	7.5	20 (3)	35	30%
Single Family Attached Residential (per unit)	3,750	18 (6)	25	10 (4) (5)	35 (3)	35	30%
Two Family Residential	10,000	75	25	6 (4)	25 (3)	35	30%
Other Permitted Uses	10,000	75	25	10	35 (3)	35	30%
Conditional Uses	10,000	75	25	10	35 (3)	35	30%
Accessory Uses	-	-	50	6	5	17	10% (2)

1. Side yard setback shall be seven feet for single story structures and eight feet for taller structures.
2. The total lot coverage shall not exceed 35 percent.
3. See Section 4.09.07 of this Ordinance.
4. On Corner Lots the following criteria apply to setbacks. In existing developed areas, the Street Side Yard setback may conform to existing setbacks of existing structures along that street. In new developments, the Street Side Yard setback shall be equal to the Front Yard setback.
5. The side yard along the common wall, only, shall be 0 feet. The common wall shall be along the adjoining lot line.
6. The minimum lot width only applies to the interior lots of a townhouse/single-family attached development. Exterior lots shall be a minimum 35 feet.
7. Existing development shall be defined as plats existing prior to September 23, 2014 and shall not include any replatting or lot splits completed after adoption.
8. Future development shall be defined as all new subdivisions created after September 23, 2014.



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## BUILDING PERMIT INSPECTION INFORMATION

<u>Name</u>	<u>Type</u>	<u>Phone Number</u>
<b>Dale Stertz</b>	<b>Building Inspector</b>	<b>402.440.5963 – leave a msg</b>
Plan Review Fee	\$50.00	
Footing	\$40.00	
Frame Rough-In	\$40.00	
Building Final	\$40.00	
<b>Jeff Kreifels</b>	<b>Plumbing Inspector</b>	<b>402.613.0275</b>
Plumbing Groundwork	\$40.00	(Alternate Inspector Mark Morris 402.475.2599)
Plumbing Rough-In	\$40.00	
Plumbing Final	\$40.00	Fuel Gas Piping Rough-In \$40.00
Outdoor Fire Pit Gas Piping	\$40.00	Fuel Gas Piping Final \$40.00
<b>Mark Howard</b>	<b>HVAC Inspector</b>	<b>402.304.9135</b>
HVAC Rough-In	\$40.00	(Alternate Inspector Dave Hochstetler 402.418.1136)
HVAC Final	\$40.00	
HVAC Fireplace	\$40.00	
<b>Ray Paulson</b>	<b>Electrical Inspector</b>	<b>402.416.8899</b>
Temporary Electric	\$40.00	
Electrical Service	\$40.00	
Electric Rough-in	\$40.00	
Electric Final	\$40.00	
<b>Trent Georgiana</b>	<b>Public Works Inspector</b>	<b>402.580.3473</b>
Water Main/Sewer Line Tap	\$ 0.00 for Inspection	
Curb Cut	\$35.00	
Sidewalk	\$45.00	

Building permit and inspection card will be issued after approval and payment received. **The building permit and inspection card are to be posted at the building site.** For new construction it is suggested that the permit pouch including inspection card be hung by the furnace.

**IT IS THE RESPONSIBILITY OF THE CONTRACTOR / BUILDER TO  
 SCHEDULE INSPECTIONS DIRECTLY WITH INSPECTORS ABOVE.**

When the construction project is finished and **all** inspections have been successfully completed and signed for, the inspection card must be returned to the City Office.

**A Certificate of Occupancy will be issued after all inspections have passed and the inspection card is returned to the office.** The Certificate of Occupancy must be issued before the residence is occupied and before the Pre-Construction deposit can be refunded.