ANTELOPE COUNTY ASSESSOR'S BUILDING PERMIT

This statement is required, pursuant to State Statute 77-1318.01, for improvements and alterations to improvements to real estate.

Date										
Owner of Property										
Person Requesting	ner of Property Telephone Number Telephone Number									
	rcel # Legal Descript. Of Property									
Start Date		Expected Com	pletion Date							
Structures removed for	or construction (befo	ore/after)								
	DI	ESIDENITIAI IMDD	OVEMENTS							
	<u>NI</u>	ESIDENTIAL IMPR	OVEIVIEN 13							
HOUSES										
Conventional	Modular N	Mobile Home	Home Addition	Remodeling						
Additions & Remodeli	ng (type & description	on)								
# of bathrooms	# o	f fireplaces	# of s	tories						
House Dimensions: W	L	H Siding	type							
Roofing	HVAC	Ba	sement Dimensions: \	<i>N</i> L H						
Basement Area Finish	ed	Basement A	rea Unfinished							
GARAGES										
Type: Attached	Detached	Carport	Size: W	L H						
MISCELLANEOUS										
Improvement type/de										
				No.						
Exterior Cover		Electricity	y/Plumbingr Yes	NO						
		/aaa								
	RURAI	_/COMMERCIAL II	<u>VIPROVEIVIENTS</u>							
GRAIN BINS										
Brand Name:										
Type: Storage	Aeration	D	rying	Hi-Moisture						
Diameter	Height	Augers:	Horizontal	Vertical						
Bushels										
ELEVATOR LEC										
ELEVATOR LEG		ı	Joight							
Dustiels/ Hour		i	ายเรเเเ							

Brand Name:					
Type: Gestation	Nursery	Farrow	Mod Op Finish	Cl Finish _	Dairy
			Frame Type: Wood		
Wall Type: Wood	Metal	B	lock Poured	l Cement	
			Dirt Oth		
IMPLEMENT BUILDIN	NGS/CLOSED SH	EDS			
Brand Name:					
Type: STR Wall	Slant Wall	Quonset	Dimensions:	W L	H
			erhead Doors		
			od Metal		Concrete
			W		
	· ·	,			
Living Quarters/Offi	ce/Etc: Yes	No	Dimensions: W	L	Н
Primary Use					
Floor Type		HVAC	# of	Bathrooms	
Please provide a deta	aneu urawing ini	ciuding location	n of improvement on pro	pperty and sur	rounding roads.

******* Failure to sign this form voids this permit