CITY OF TOPEKA

CITY CLERK
City Hall, 215 SE 7th St., Room 166
Topeka, KS 66603-3914
(785) 368-3941

Brenda Younger, M.M.C.
E-mail: cclerk@topeka.org
Fax: (785) 368-3943
www.topeka.org

NEW SALVAGE YARD APPLICATION

APPLICANT INFORMATION
(Salvage Yard Owner)

Name: _____

Residence Address: _____

_____Zip: _____

Telephone Number: _____Email:_____

BUSINESS INFORMATION
(Salvage Yard)

Name: _____

Address: _____ Zip: _____

Telephone Number: _____

State Sales Tax Number: _____

Zoning: _____

Property Legal ID Number: _____

Legal Description: _____

_____

Area of Property, Square Feet and/or Acres: _____

Are There Any Covenants of Record Which Prohibit the Proposed Salvage Operation:_____

Present Use of Property: _____

Zoning of All Adjacent Properties of Record:

North: _____

West: _____

South: _____

East: _____

Briefly Describe Your Proposed Salvage Operation:

_____

_____

_____

Explain in Summary:

The Materials to be Stored within the Salvage Yard:

_____

_____

_____

The Methods of Operation and Material Handling Operations:

_____

_____

_____

All Operations Which May Have Air Emissions, Including But Not Limited To: Smelting, Stationary Cranes, Generators, Incinerators, Waste Oil Burners, Etc. Indicate Permit Numbers If Applicable:

_____

_____

_____

Indicate the Name and Largest Amount of Liquid Stored of any type at any given time.

_____

_____

On-Site Fire Control Systems.

_____

_____

_____

Sec. 5.135.020 to 05.135.110 City Code
Sec. 5.135.020 Submit Site Plan with New Applications

New License Fee: $280.00 January 1 to December 31 Sec. 5.135.050
Renewal Fee: $140.00 January 1 to December 5.135.050

TAX STATUS FORM Sec. 5.05.090
Sec. 5.135.050 License not transferable

(Office Use Only)
License Fee: $280.00 Cash (_) Check (_) (Check No._____)

Date Paid: ____________ License No.: SVYD_____

Date Sent to Planning Department: _____

Planning: _____ Date: _____

Date Sent to Fire Department: _____

Fire Inspector: _____ Date: _____