

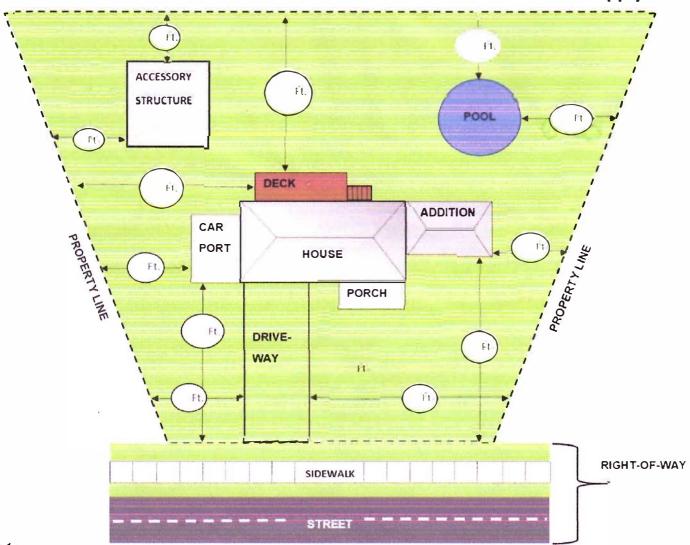
## **BUILDING PERMIT APPLICATION**

Permit #:	
ssue Date:	
Exp Date:	

		PROJECT INFORM	MATION				
Project Address:	Sub / Lot # :						
Scope of Work:							
Permit Type:	New Construction	Roof	Zone:	Sa Fa	ootage:		
, , ,	Remodel	Deck		<b>0</b> 4. (	, otago.		
	Addition	Fence	Estimated Project Cost:				
	Electrical Sewer	Sign Other	*Provide additional details on Page 2 Site Plan				
					otano on rago 2 ono rian		
	C	ONTRACTOR INFO	RMATION				
General Contractor:	Contact:						
*City License #:	Phon	ie:	Email:				
Subcontractors:	Name	Phone		Email	*City License #		
Concrete							
**Plumbing							
**Electrical							
Mechanical							
Framing							
Roofing							
Drywall							
* Required for all contractors a	nd subcontractors.			(list any addition	nal subcontractors on page 2)		
** Must be able to provide prod	of of Block Test completion of	or Trade License for town o	of similar size.	,	,		
Owner Name:	Phone:						
Home Address:	Email:						
In the discharge of his/her during the proof		•	•	, ,	•		
jurisdiction to enforce the prov the owner of record and that I							
applicable laws of this jurisdicti	ion.				·		
Applicant Nar	ne	Applican	t Signature		Date		
FOR CITY USE ONLY							
Signature		Date			Permit Fee		
Required Documents:	Business Licenses Insurance Certificates		Status: Appro-		Valuation		
	Site Plan / Drawings	<del></del>	Paid	u	valuation		
	-		660 560 0505 5	CCO ECO ECO 4			
	201 N. State St. Knob No	ster, MO 65336 * Pho	ne: 660-563-2595 Fa	ix: 00U-203-2634			

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## **EXAMPLE SITE PLAN**—Provide setback measurements for all that apply.



Notes:

## Additional Subcontractors:

Trade

**Subcontractor Name** 

Phone

Email

City License #