

BUILDING PERMIT APPLICATION

Jurisdiction of City of Harrisonville
FOR INSPECTIONS CALL (816) 380-8958

Date

Permit No.

JOB ADDRESS		PARCEL NO.	
1. LEGAL DESCR.	USE ZONE	DATE TO COMMENCE	
2. OWNER	MAIL ADDRESS	ZIP	PHONE
3. CONTRACTOR	MAIL ADDRESS	PHONE	
4. ARCHITECT OR DESIGNER	MAIL ADDRESS	PHONE	LICENSE NO.
5. PLUMBER	MAIL ADDRESS	PHONE	
6. ELECTRICIAN	MAIL ADDRESS	PHONE	
7. MECHANICAL	MAIL ADDRESS	PHONE	
8. CLASS OF WORK: <input type="checkbox"/> NEW <input type="checkbox"/> ADDITION <input type="checkbox"/> ALTERATION <input type="checkbox"/> REPAIR <input type="checkbox"/> MOVE <input type="checkbox"/> REMOVE			
9. DESCRIBED WORK:			

10. USE OF BUILDING

	PLAN CHECK FEE	PERMIT FEE	
CHANGE OF USE TO/FROM	Type of Const.	Occupancy Group	Division
11. VALUATION OF WORK: \$	Size of Bldg. (Total) Sq. Ft.	No. of Stories	Max. Occ. Load
		No. of Bedrooms	Fire Sprinklers Required <input type="checkbox"/> Yes <input type="checkbox"/> No
SPECIAL CONDITIONS	No. of Dwelling Units	No. of Rooms	Parking Spaces

	INSPECTIONS	REQUIRED	NOT REQUIRED	FEE	
APPROVED BY:	TEMP. ELEC.				
DATE	FOOTING				
SETBACKS	UND. FL. PLUMB.				
	FRAMING				
	ROUGH PLUMB.				
	ROUGH ELEC.				
	WATER				
	SEWER				
	GAS				
	WATER SUPPLY	FINAL PLUMB.			
	SEWER DISPOSAL	FINAL ELEC.			
		MECHANICAL			
	SPECIAL				
	OCCUPANCY				
SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT (DATE)		WATER SYSTEM CONNECTION FEE		\$	
SIGNATURE OF OWNER (IF OWNER BUILDER (DATE))		WASTEWATER SYSTEM CONNECTION FEE		\$	
		ELECTRIC CONNECTION FEE		\$	
TOTAL				\$ _____	

THIS PERMIT BECOMES NULL AND VOID IF WORK AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER WORK IN COMMENCED.