COMMERCIAL BUILDING PERMIT APPLICATION

DATE: _____

103 S. Pennsylvania Avenue, Lawson, MO 64062 ● 816-580-3217 ● www.cityoflawsonmo.org

Permit Number C | ___|__|

	PARCEL ID NUMBER						
OFFICIAL	STREET NUMBERSTREET I						
USE ONLY	TYPEDIRECTIONUNIT/SUITE						
	ZONING NOTES						
	NOTES						
	FINAL APPROVAL	TOTAL PERMIT FEE \$					
	PROJECT IDENTIFICATION	PROPERTY	Y OWNERSHIP DETAILS				
PROJECT NAME		TYPE: INDIVIDUAL GOVERNMENT AGENCY BUSINESS FULL LEGAL NAME, AGENCY, OR BUSINESS					
PROJECT CONTACT							
PROJ CONTACT PHOI	NE (
PERMIT ASSOCIATIONS? NO YES		MAILING ADDRESS					
☐ COMMERCIAL PER	міт С	OWNER CONTACT PHONE ()					
If yes, list permit data:		OWNER E-MAIL ADDRESS					
	BUILDING PERMIT ADDRE	SS (This is the physical address of the	ne actual work location.)				
STREET NUMBER	STREET NAME		UNIT/SUIT				
ZIP CODE	INTERSECTING STR	EETS	AND				
LOT NOB	LOCKSUBDIVISION	CITY PLANNIN	NG CASE #				
profile y	LICENSED CONTRACTOR		DESIGN PROFESSIONAL				
COMPANY NAME		COMPANY NAME					
NAME		LICENSE NAME					
CONTRACTOR CLASS OCCUPATIONAL #		LICENSE NUMBER					
ADDRESS		ADDRESS					
PHONE	FAX	PHONE	FAX				
E-MAIL ADDRESS		E-MAIL ADDRESS					
NAME	LEHOLDER (IF OTHER THAN OWNER)	BONDING COMPANY NAME	MORTGAGE LENDER NAME				
ADDRESS		ADDRESS	ADDRESS				
Applicant Signature: Print Name:							
Title:							

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WORKER'S COMPENSATION EXEMPT (Insurance or Other) INSURER # OF EMPLOYEES EXPIRATION DATE				I attest the Worker's Compensation information provided on this permit application is true and correct and that the applicant is in full compliance with the State of Missouri Worker's Compensation laws.				
OWNER or AGENT (If Agent, Power of Attorney or Agency Letter Required)				CONTRACTOR AFFIRMATION (Qualifier only)				
Signed: Date://			Signe	Signed://				
PLANS	JOB COST	PAYMENT METHOD		BRI	EF DESC	CRIPTION OF WORK		
□ Plot□ Res Check□ Building□ Other (See Plans)	Total costs to include MEP work.	□ Check□ On-line pay□ Credit Card□ Exempt						
TYPE OF IMPR	OVEMENT	DIMENSIONS		PROPOSED USE		POSED USE		
New Building Remodeling Accessory Building Addition Alterations and Re Converting Use Demolition Foundation Only Move Building Other: Specify Commercial Roofin New Shell Only Swimming Pool ga	pairs	Number of Stories Building Height in feet Total Floor Area (SF) Conditioned Land Area square feet acres Basement Area for This Pern finished unfin. (SF) Finished Area (SF) Unfinished Area (SF) Garage Floor Area (SF) Deck Area (or patio) (SF) Covered Open		RESIDENTIAL Apartments Carports Condominiums Garages Other: Specify	UNIT	NON-RESIDENTIAL Amusement, Recreational Business Condo Church, Other Religious Daycare Hospital, Institutional Hotel, Motel, Dormitory Industrial Office, Bank, Professional Other, Specify Parking Garage Restaurant School, Library, Educational Service Station, Repair Garage Stores, Mercantile Utilities		
□ Tenant Finish For demolition / renovation projects on additions / remodels:								
Mandatory Action: If asbestos is subsequently discovered, then the applicant shall immediately provide notice to Building Inspections and amend this application. Is asbestos present? □ Yes □ No								
Applicant Signature: Print Name: Title:								

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CERTIFICATE OF OCCUPANCY	ELECTRICAL CODE USED	PRINCIPLE TYPE OF FRAME	NEW RESIDENTIAL PERMIT INFO	
Occupancy Classification BUILDING CODE USED		□ Masonry (Load Bearing) □ Wood Frame □ Structural Steel	No. of Guest rooms	
Maximum Occupancy Load		☐ Reinforced Concrete ☐ Other: Specify ————	Bathrooms Full	
Live Loads	SEWAGE DISPOSAL	MECHANICAL # of units	Art / Condo Multi family	
Building Code	Total # of Traps:	Furnace	Apt. / Condo – Multi-family One-bedroom units	
Type of Construction	sinks, washer, toilets, shower/tubs, floor drains	Heat Pump ☐ Yes ☐ No Total Cooling Capacity	Two-bedroom units	
	EOP OFFICI	(in tons)	Times plue sod diliko	
ENGINEERING	101(011101			
 Sewer Driveway/Parking Curb, Gutter and S 	Sidewalk Design urface Water Retention	OFFICE OF THE CITY ENGINEER Erosion Field Rep Date// Signed		
PLANNING				
	Rear City Plann	er	FEE CALCULATIONS Building Permit Fee \$	
Side 1 _ Covered Parking _	Side 2 Date	_// Signed	Plan Review Fee \$	
☐ Uncovered Parking			Inspection Fee \$	
☐ Lot Coverage	%		Demo Permit Fee \$	
Off Street ParkingFootprint of Structure	Demo Bond \$			
	1 tree □ 2 trees □ Commerc	cial Site Plan approved	Total Fee \$	
Other Permits Required	Flec Mech PLRG	The second secon		
Application is hereby made to obtathe issuance of a permit and that a that a separate permit must be set FURNACES, BOILERS, HEATERS Valuation for this permit will be Cost (SFCC) category. The SFCC	ain a permit to do the work and installatio all work will be performed to meet the star cured for ELECTRICAL WORK, PLUMBI	ndards of all laws regulating construction NG WORK, SIGNS, POOLS AND MEC	on in this jurisdiction. I understand CHANICAL WORK SUCH AS	
Applicant Signature:		Print Name:		
Title:				

Revised 11/2018