



City of Smithville, Missouri
 Building Permit Application
 2012 International Code – 2011 NEC

TYPE OF CONSTRUCTION:

DATE: _____

Select all that apply:

- New Residence Addition
- Basement Finish

- New Commercial Building Addition
- Tenant Finish

PROPERTY ADDRESS: _____
PROPERTY OWNER: _____
ADDRESS IF DIFFERENT FROM PROPERTY: _____

CONTRACTOR INFORMATION:

CITY OCCUPATION LICENSE # _____

If you do not have a license, please provide the following information AND complete an Occupation License Application.

NAME: _____	BUSINESS PHONE# _____
ADDRESS: _____ _____	LOCAL CONTACT/CELL # _____
	E-MAIL*: _____ *Permits and invoices only sent via e-mail OR you must pick up at City Hall
Project Valuation – do not include lot price in valuation: _____	
Unfinished Ft ²	Finished Ft ²

All projects MUST include a site plan showing buildings and property lines w/dimensions. Projects that include walls or floors (including Decks) must show methods of construction of structural items.

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

SIGNATURE

E-MAIL

PHONE NO.

Notice: The disposal of demolition waste is regulated by the Department of Natural Resources pursuant to chapter 260, RSMo. Such waste, in types and quantities established by the department, shall be taken to a demolition landfill or a sanitary landfill for disposal.

CONTACT INFORMATION

TENANT/OWNER

NAME _____ CONTACT NAME _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____
PHONE _____ FAX _____ CELL _____
E-MAIL _____

GENERAL CONTRACTOR/BUILDER

E-MAIL _____
NAME _____ CONTACT NAME _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____
PHONE _____ FAX _____ CELL _____
E-MAIL _____

ELECTRICAL CONTRACTOR

NAME _____ CONTACT NAME _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____
PHONE _____ FAX _____ CELL _____
Master Electrician's License # _____ Issuing Jurisdiction _____
E-MAIL _____

HVAC CONTRACTOR

NAME _____ CONTACT NAME _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____
PHONE _____ FAX _____ CELL _____
Master Mechanic's # _____ Issuing Jurisdiction _____
E-MAIL _____

PLUMBING CONTRACTOR

NAME _____ CONTACT NAME _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____
PHONE _____ FAX _____ CELL _____
Master Plumber's License # _____ Issuing Jurisdiction _____
E-MAIL _____

EXCAVATOR/OTHER CONTRACTOR

NAME _____ CONTACT NAME _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____
PHONE _____ FAX _____ CELL _____
E-MAIL _____

ENGINEER/ARCHITECT

NAME _____ CONTACT NAME _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____
PHONE _____ FAX _____ CELL _____
E-MAIL _____