

APPLICATION FOR BUILDING PERMIT & CERTIFICATION OF OCCUPANCY
Boone County, Missouri

Fee \$ _____

Estimated cost
of Construction \$ _____

Permit # _____
Date _____/_____/_____
Health Public
Dept.: _____ Works# _____

Property

Owner: _____
Last Name/First Name Address City State Zip Daytime Phone/Mobile

Contractor: _____
Last Name/First Name Address City State Zip Daytime Phone/Mobile

NOTE: Please provide a copy of a recorded Deed for proof of ownership and a survey if applicable
Please provide a survey/sketch plan with proposed location of building.

Type of Construction _____	Use of Building _____	# of Dwelling Units _____
Number of feet from property lines: Front _____ Sides _____/_____ Rear _____		
Structures presently on site _____ Size of property _____ x _____ = _____ Sq. Ft./Acres		

Basement Square footage	_____	_____	=	_____
1st Floor Square footage	_____	_____	=	_____
2nd Floor Square footage	_____	_____	=	_____
Other	_____	_____	=	_____
Garage attached/detached	_____	_____	=	_____
Pole Barn/Shed	_____	_____	=	_____
Deck/Porch/Etc.	_____	_____	=	_____

Height of building of peak: _____

TOTAL SQ. FT: _____

Number bedrooms _____ *bathrooms _____
 DRIVEWAY TYPE: (_____) driveway with (_____) road

Type of foundation: _____ BASEMENT _____ CRAWL SPACE _____ SLAB WITH FOOTINGS _____ WOOD _____ POLE _____ PIER HOLES
Type of Waste Water System: _____ LAGOON _____ SEPTIC SYSTEM _____ CENTRAL SYSTEM _____ OTHER/BOR APPROVED _____ EXISTING (REPORT TO H.D. _____)

FOR OFFICE USE ONLY: Zoning _____ Parcel# _____ - _____ - _____ - _____ - _____ S-T-R _____ - _____ - _____ Off-street parking spaces required _____ Subdivision _____ Lot _____ Block _____ Floodplain panel 290034 _____ Flood Plain Dev. Permit Req. _____ Permit# _____ 911# _____ Sinkhole area _____ Engineer _____ Directions to site: _____ _____ _____ Comments: _____ Approved by: _____ Date: _____/_____/_____
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Will this structure be used for commercial/business purposes? _____ yes _____ no
if yes, please explain:

_____ Initial _____

I hereby certify that I have read and examined this application and know the same to be true and correct, and to comply with all County Ordinances and State Laws regulating building construction.

I understand that this *permit shall become null and void if construction does not begin within six (6) months of the date that the permit is issued; or if construction stops for more than six (6) months.*

I understand that a **minimum notice of one-half day** is required for inspections unless otherwise stated by this office, and that **no work may proceed until an inspector has approved the inspection that has been requested.**

I understand that a CERTIFICATE OF OCCUPANCY is required prior to occupancy of this structure and that, no structure shall be occupied until a Final Inspection has been requested, the Final Inspection has been performed and a CERTIFICATE OF OCCUPANCY has been issued.

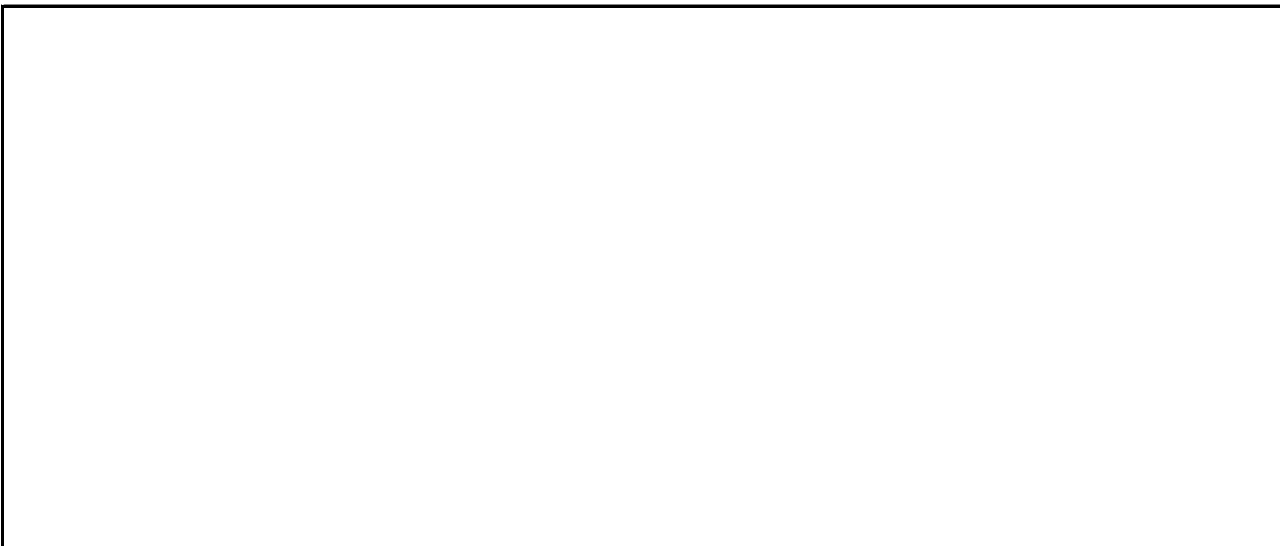
Applicant's Signature _____ Date ____/____/____

PLOT PLAN

(Completed by applicant)

1. Please show and label streets/roads and indicate location of driveway.
2. Please show the location and dimensions of the proposed building in relation to lot lines.
3. Indicate location of wastewater treatment in relation to structure and lot lines.
4. Indicate and label all existing structures on property.
5. For additions, indicate existing structure and location of addition.

REAR PROPERTY LINE



FRONT (STREET FRONTAGE)