



***Must fill out all Required Fields.**

Application for Construction Permit

***Permit Use:**

***Permit Type (check all that apply)**

Single Family Industrial Building Plumbing Demo. Pool Grading
 Multi Family Mfg. Home Electrical Water Tap Sign Shed Land Use
 Commercial Mechanical Sewer Tap Other COA Tenant F.

Construction Information

*Job Address: _____ Unit#: _____ Date: _____
 *Project Name: _____
 Addition: _____ Lot#: _____ Parcel: _____
 Occupancy Group: _____ Construction Type: _____ Occupancy Load: _____ Property Zoning: _____
 Square Footage of Structure: _____ Number of Stories: _____ Water Meter Size: _____ Sprinkled: _____
 *Description of work: _____

Applicant Information

*Name: _____ *Mobile#: _____ *Phone #: _____
 *Address: _____ *City: _____ *State: _____ *Zip Code: _____
 *Property Owner: _____ *Email: _____

General Contractor:

*Business Name: _____ *Mailing Address: _____
 *Contact name: _____ *Email: _____ *Phone#: _____

Sub-Contractors

*Plumbing: _____ *Electrical: _____
 *Mechanical: _____ *Fire Sprinkler: _____

Estimated Construction Cost

Electrical Cost: \$ _____ Mechanical Cost: \$ _____ **Total Project Cost:**
 Plumbing Cost: \$ _____ Construction Cost: \$ _____ \$ _____

Must Submit for: Residential-2 Sets of Plans w/Stamped Plot Plan.
 Commercial- 3 Sets of Plans w/ Digital Copy and Stamped Plot Plan.
 All contractors shall be qualified and licensed to work within the city limits of Excelsior Springs. Performance of work shall follow minimum standards of the 2012 IBC, IRC, IMC, IPC, IFC, IEBC, IPMC, ISPSC, and 2011 NEC. This building shall not be occupied without final inspection approval and a Certificate of Occupancy issued from the Community Development Inspections Department.

 Community Development located at: 201 E. Broadway Ave, Excelsior Springs, MO 64024
 Or call (816)630-0756 * fax (816)630-9572 *
 email: permits@excelsiorsprings.gov

 7/16/2020