



The City of **Grandview Plaza** ★

*"The Secret City across the River"*

The City of Grandview Plaza ● 402 State Ave. ● Grandview Plaza ● Kansas ● 66441

## APPLICATION FOR BUILDING PERMIT

**\*\*DO NOT BEGIN WORK UNTIL PERMIT IS ISSUED\*\***

**PERMITS ARE VALID FOR A MAXIMUM OF 60 DAYS**

**(EXTENSION AVAILABLE PENDING APPROVAL BY CITY SUPERINTENDENT)**

**START DATE CAN NOT BE WITHIN 3 BUSINESS DAYS OF COMPLETED APPLICATION**

Start Date: \_\_\_\_\_ Completion Date \_\_\_\_\_

**Construction Address:** # \_\_\_\_\_ Name \_\_\_\_\_

Primary Use: Residential \_\_\_ Commercial \_\_\_

**Type of Improvement:** \_\_\_\_\_

Repair/Replace \_\_\_\_\_ Size \_\_\_\_\_ Material \_\_\_\_\_

Addition \_\_\_\_\_ Size \_\_\_\_\_ Material \_\_\_\_\_

Demolition \_\_\_\_\_

**Total Cost of Improvement:** \$ \_\_\_\_\_

Permit Type:

ROOFING

Fencing

Sewer

Gas

ROOFERS STATE REG

Structure

Water

Electric

#: \_\_\_\_\_

Structural Modification

(REQUIRED)

Licensing / Certification \_\_\_\_\_

Owner Information

Contractor Information

Name \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Phone \_\_\_\_\_

Applicant Name Printed: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

Applicant Email or Phone # \_\_\_\_\_

Date: \_\_\_\_\_

\*THIS IS AN APPLICATION ONLY. WHEN APPLICATION IS APPROVED YOU WILL BE NOTIFIED TO COME AND PICK UP A PERMIT OR HAVE A PERMIT EMAILED TO YOU\*

\*PERMIT FEE OF \$20.00 WILL BE DUE UPON DELIVERY OF PERMIT\*

-----**FOR OFFICE USE ONLY**-----

Approved By: \_\_\_\_\_

Date Permit Issued: \_\_\_\_\_ Permit No. \_\_\_\_\_