

CITY OF STEWARTSVILLE

ADDITIONS - BUILDING AND CONSTRUCTION PERMIT

(Construction must be completed within nine months from beginning groundwork.)

Applicant Name _____ DATE _____

IMPORTANT - Applicant must complete all items in sections I, II, III, IV, V, VI & VII that apply to them.

I. LOCATION OF CONSTRUCTION Street Address _____

II. IDENTIFICATION - To be completed by all applicants

	Name	Mailing address - Number, street, city, state, zip	Tele.No.
Owner or Lessee			
Contractor			

The owner of this building and the undersigned agree to conform to the City of Stewartsville's Code on Building and Construction of Homes.

HOLD HARMLESS CLAUSE: The Permittee(s) (Residential and Commercial) by acceptance of this permit agree(s) to indemnify and hold harmless the City of Stewartsville and its employees, from and against all claims, demands and actions for damages resulting from operations under permit, that may result from permittee(s) not complying with all applicable State of Missouri Codes (2009 International Residential/Commercial Building Codes) or City Code, regardless of negligence of the City of Stewartsville, and its employees, and to assume the defense of the City of Stewartsville, and its employees, against all claims, demands and actions.

CONTRACTOR _____

(Check ALL that apply)

III. TYPE OF CONSTRUCTION

<input type="checkbox"/> Room Addition	<input type="checkbox"/> Garage
<input type="checkbox"/> Storage Building	<input type="checkbox"/> Fence - TYPE _____ *
<input type="checkbox"/> Pool in Ground	<input type="checkbox"/> Driveway-Hard Surface (Must have road tube)
<input type="checkbox"/> Pool Above Ground***	<input type="checkbox"/> Driveway-Gravel (Must have road tube)

Other Types of Construction _____

Residential or Commercial use? Dimensions ____ X ____

If Commercial - Describe Type _____

*All construction must comply to City Codes ***How deep is pool? _____

*Fences around pools must be chain link or privacy fence. *** Pools must have fence up before more than 24" of water is in pool.)

IV. MAIN OR PRINCIPAL MEANS OF CONSTRUCTION (If Room Addition)

<input type="checkbox"/>	Masonry
<input type="checkbox"/>	Wood Frame
<input type="checkbox"/>	Structured Steel
<input type="checkbox"/>	Reinforced Concrete
<input type="checkbox"/>	Other (Specify) _____

V. (If Room Addition)

DIMENSIONS Total Square Feet Living Space _____ Dimensions ____ X ____

VI. Estimated Date to Begin _____ Estimated Completion Date _____

