

CITY OF STEWARTSVILLE

NEW HOME - 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.

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 and the State of Missouri 2009 International Residential/Commercial Codes.

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 action 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"/>	Conventional Home	<input type="checkbox"/>	Room Addition	<input type="checkbox"/>	Garage
<input type="checkbox"/>	Modular Home	<input type="checkbox"/>	Storage Building	<input type="checkbox"/>	Fence Type _____ ***
<input type="checkbox"/>	Manufactured Home	<input type="checkbox"/>	Pool in Ground	<input type="checkbox"/>	Driveway-Hard Surface *
<input type="checkbox"/>	Mobile Home	<input type="checkbox"/>	Pool Above Ground**	<input type="checkbox"/>	Driveway-Gravel *
<input type="checkbox"/>	Other Types of Construction _____				
<input type="checkbox"/>	Residential or	<input type="checkbox"/>	Commercial use?		

If Commercial - Describe Type _____

*Must have approved Roadtube **How deep is pool? _____ ***Must be approved by Code Enf.

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) _____

FOR CENSUS REPORT:
VALUE \$ _____

V. DIMENSIONS Number of Stories _____ Total Square Feet Living Space _____ Dimensions _____ X _____

VI. Estimated Date to Begin _____ Estimated Completion Date _____