Building Permit Application

Accessory Use Structure
City of Plattsburg
816-539-2148

Date: _____

Job Address: _____

Name of Property Owner: _____

Address: _____

☐ Architect ☐ Engineer ☐ Contractor ☐ Other

Name of firm: _____

Address: _____

City: _____ State _____ Zip: _____

If out of State, transient employer must show proof of issuance of tax clearance and has filed a financial assurance instrument as required by Section 285.230, RSMo. If no documentation of tax clearance can be provided, transient employer must contact DOR at (573) 751-3804 to request proper tax clearance info.

Building Use: ☐ New ☐ Addition ☐ Alteration ☐ Other

Description: _____

Special Conditions: _____

Size of Structure: _____(square feet) Zoning: _____% Lot Coverage: _____

This structure is not for commercial use.

Signature of owner: _____ Building Permit#: _____

( ) Accepted

( ) Denied

Fee: _____

By: _____

Reason(s) for denial: _____

_____

*** Be sure to complete the back of this page.**

PLOT PLAN

Site Area: _____ sq. ft. Area of site occupied by buildings: _____ sq. ft.

Instructions to Applicant

THIS FORM NEED NOT BE USED WHEN PLOT PLANS DRAWN TO SCALE ARE FILED WITH THE PERMIT APPLICATION. (EACH BUILDING SITE MUST HAVE A SEPARATE PLAN)

FOR NEW BUILDINGS, PROVIDE THE FOLLOWING INFORMATION IN THE SPACE PROVIDED BELOW:

- LOCATION OF PROPOSED CONSTRUCTION AND EXISTING IMPROVEMENTS
- BUILDING, SITE AND SETBACK DIMENSIONS
- EASEMENTS, FINISH CONTOURS, DRAINAGE
- SEWER AND STREET ELEVATIONS
- LOCATION OF WATER, SEWER, GAS, AND ELECTRICAL SERVICE LINES
- LOCATION OF SURVEY PINS

INDICATE NORTH IN CIRCLE

I/We certify that the proposed construction will conform to the dimensions and that no changes will be made without first obtaining approval.