

Scott City Permit Form

215 Chester Ave. Scott City MO, 63780 (573) 264-2157



Office Use Only
Date Submitted: _____
Permit Number _____

Type of Permit:

Fence Permit

Property Information:

Address: _____

Owners Name or Company: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Cell: _____

Residential

Commercial

Industrial

Applicant / Contractor Information:

Applicants Name or Company: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Cell: _____

Fence Permit:

Type of Fence: _____

Height of Fence: _____

Corner Lot: Yes No

Fence Location: Front Yard Back Yard

Office Use Only

Cost of Fence Permit: _____

Contractor Information: Contractors must have a contractor's license through the City of Scott City. All contractors must have a current Certificate of Insurance for Commercial General Liability and Workers Compensation & Employers Liability Insurance.

Type of Work	Company Name	Phone Number
Excavating		
Concrete Foundation		
Concrete Flatwork		
Framing		
Plumbing		
Electrical		
HVAC		
Roofing		
Masonry		
Siding		
Painting		
Dry Wall		
Guttering		
Landscaping		
Demolition		
Other		

Required: Drawing of Setbacks and/or Blueprints. All Setbacks must be measures from the Right-Of-Way or interior property line. Do Not measure from the corner, or edge of pavement.

Required: Project Description: _____

Required: Total Estimated Value of Construction: _____

Office Use Only

Cost of Building Permit: _____

The building inspector is Rob Hodo. He can be reached at 573-264-4164. Please contact him to set up inspections.

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter area covered by such permit at any reasonable hour to enforce the provisions of the code(s).

Prior to start of new construction the location of utilities and service taps should be located and physically verified on site.

No water meters for new construction will be set until the utility customer for this location has signed up for services with City Hall.

Signature

Print Name

Office Use

Approved by Building Inspector: _____
Building Inspector Signature

Date of Approval: _____

Approved by Public Works Director: _____
Public Works Director Signature

Date of Approval: _____

Denied Approved

Building Inspection Record

Building Permit Number: _____

BEFORE WORK IS STARTED, CALL ROB HODO 264-4164 TO SET UP INSPECTIONS

Job Address: _____

Nature of Work: _____

Use of Building: _____

Date Issued: _____

Owner: _____

Contractor: _____

BUILDING INSPECTOR MUST SIGN ALL SPACES PERTAINING TO THIS JOB

Inspection	Date	Inspector
Set Back		
Trench		
Reinforcing		
Foundation Wall & Weather Proofing		

DO NOT POUR FLOOR UNTIL ABOVE HAS BEEN SIGNED

Inspection	Date	Inspector
Rough Electrical		
Rough Plumbing		
Rough Gas Piping		
Rough Heating & Ventilation		
Framing		

Inspection	Date	Inspector
Final		
Building		
Electrical		
Plumbing		
Gas		
Mechanical		
Job Completed		



CITY OF SCOTT CITY

215 Chester Ave., ♦ Scott City, MO 63780 ♦ (573) 264-2157

NOTICE TO ALL CONTRACTORS:

All contractors, including sub-contractors, will be required to purchase a contractor's license from the City of Scott City and provide a current certificate of general liability insurance. Failure to do so will result in a "stop work" action.

A handwritten signature in cursive script that reads "Norman Brant".

Norman Brant, Mayor