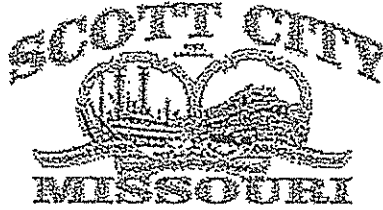


Permit No: \_\_\_\_\_

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



### CITY OF SCOTT CITY

DEPARTMENT OF BUILDING AND CODE ENFORCEMENT  
215 Chester Ave., ♦ Scott City, MO 63780 ♦ (573) 264-2157

## Application for Plumbing Permit

PROPERTY OWNER: \_\_\_\_\_ PHONE: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_

CONTRACTOR/PERSON PERFORMING WORK: \_\_\_\_\_

CONTRACTOR'S PHONE NUMBER: \_\_\_\_\_

CONTRACTORS: THE CITY OF SCOTT CITY MUST HAVE ON FILE A CURRENT CERTIFICATE OF INSURANCE FOR COMMERCIAL GENERAL LIABILITY AND WORKERS COMPENSATION & EMPLOYERS LIABILITY INSURANCE

#### TYPES OF SERVICE BEING DONE:

NEW SERVICE (WATER/SEWER) \_\_\_\_\_

REPLACEMENT SERVICE (WATER/SEWER) \_\_\_\_\_

RENOVATE OVER 40% OF EXISTING WATER AND/OR SEWER LINES \_\_\_\_\_

OTHER: \_\_\_\_\_

I CERTIFY AS AN OWNER OF THIS PROPERTY THAT I WILL BE THE ONE PERFORMING THE WORK DESCRIBED ABOVE:

Signed: \_\_\_\_\_  
HOME OWNER

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

Printed: \_\_\_\_\_

-OR-

Signed: \_\_\_\_\_  
CONTRACTOR

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

Printed: \_\_\_\_\_

## 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
FOUNDATIONS:		
Set Back _____		
Trench _____		
Reinforcing _____		
Foundation Wall & Weather Proofing _____		

**DO NOT POUR FLOOR UNTIL ABOVE HAS BEEN SIGNED**

Rough Electrical _____		
Rough Plumbing _____		
Rough Gas Piping _____		
Rough Heating & Ventilation _____		
Framing _____		

Final _____		
Building _____		
Electrical _____		
Plumbing _____		
Gas _____		
Mechanical _____		
Job Completed _____		



CITY OF SCOTT CITY

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**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".

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Norman Brant, Mayor