



Building Permit Application

Demolition

Community Development Department
 Phone: (417) 732-3150
 Email: permits@republicmo.com

| | | | | |
|--|------|------------------------|--------------|---------|
| Application Date: | | Permit No: | | |
| Site Information | | Site Address: | | |
| Legal Description <i>(office use only)</i> | PIN: | Lot Number: | Subdivision: | Zoning: |
| Owner Information | | Name: | | |
| Address: | | City: | | State: |
| Email Address: | | Phone Number: | | Zip: |
| Contractor Information | | Name (Contact Person): | | |
| Name (Company): | | License Number: | | |
| Address: | | City: | | State: |
| Email Address: | | Phone Number: | | Zip: |
| Project Information | | | | |
| Has the Applicant notified adjacent property owners? | | Yes | No | |
| Are asbestos or other harmful materials present at the project site? | | Yes | No | |
| Project Description: _____ | | | | |
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By signing this application form, I hereby acknowledge that the information I have provided is complete and accurate to the best of my knowledge. Furthermore, I acknowledge my responsibility to conform to the applicable federal, state and local regulations pertaining to the project described by this application and attachments. I also understand that this application will expire within 180 days of the date of my signing, unless extended in writing by the Building Official.

Date _____ Name (please print) _____ Signature _____

OFFICE USE ONLY

Permit Type: _____

| | | |
|---|----------|--------|
| Building Code Review | Approved | Denied |
| Comments: _____ | | |
| Signature: _____ Date: _____ | | |
| Zoning Code Review | Approved | Denied |
| Comments: _____ | | |
| Signature: _____ Date: _____ | | |
| Floodplain Review | Approved | Denied |
| Comments: _____ | | |
| Signature: _____ Date: _____ | | |
| Fire Code Review | Approved | Denied |
| Comments: _____ | | |
| Signature: _____ Date: _____ | | |
| Public Works Review | Approved | Denied |
| Comments: _____ | | |
| Signature: _____ Date: _____ | | |
| Signature: _____ Date: _____ <small>Public Works</small> | | |
| Signature: _____ Date: _____ <small>Water Department</small> | | |
| Signature: _____ Date: _____ <small>Waste Water Department</small> | | |

Approved by _____ on _____

| Permit | Fees |
|------------------|--------------------------|
| Issued: _____ | Penalty Fee YES NO |
| Expires: _____ | Assessed |
| Extension: _____ | Fee Total \$ _____ |