CITY OF MISSION HILLS
Application for Building Permit

PERMIT APPROVED

Signature_____

Date_____

6300 State Line Road
Mission Hills, KS 66208
(913) 362-9620
Fax: (913) 362-0673

Date Submitted: _____

Permit Number: _____

Date Issued: _____

I (We) hereby make application for a building permit pursuant to Section 5-116 of the Zoning Regulations, Code of Ordinances, City of Mission Hills, Kansas, and state and certify as follows:

1. Street address is: _____
2. Owners of the property are: _____
3. Provide a complete description of all activity that will be covered by this building permit: _____

   _____
4. Principal materials of construction are: _____
5. Property upon which the proposed construction will occur is platted.
6. Estimated cost of the proposed construction is: _____
7. Total square footage of the proposed project is: _____
8. Total square footage of land that will be disturbed is: _____
9. Amount of fill being brought onto the property (in cubic yards) is: _____
   [Fill is the deposit of natural earth materials (except mulch), including soil, rock, & gravel, placed by artificial means.]
10. Distance of land disturbance activity from creek or property line is: _____
11. Slope of property at site of land disturbance activity is: _____
    [Slope is how far the grade drops in the area of the disturbance, such as 1 foot vertical by 15 feet horizontal.]
12. The person or entity erecting the proposed structure has liability insurance in an appropriate amount.

Name of Contractor	Name of Property Owner
Street Address	Street Address
City, State & Zip	City, State & Zip
Daytime Phone Evening Phone	Daytime Phone Evening Phone
Signature of Contractor	Signature of Property Owner
Liability Insurance Carrier	

For City Use Only

INSPECTIONS

Footing	_____
Stem Walls	_____
Rough-In	_____
Drive Approach	_____
Gas Test	_____
Final	_____
Other	_____
Other	_____
Other	_____
Other	_____

CALL FOR INSPECTIONS AT LEAST 24 HOURS IN ADVANCE.

Permit Cost: _____
Inspection Fees: _____
Stormwater Plan Fee: _____
Total: _____
Date Fees Paid: _____
Permit Expires: _____
Clerk: _____
Extension Date: _____
_____
Extension Approval
Bond Amount: _____
[Concrete=$2,500; New Structure=$5,000)
Floodplain approval needed:
_____ Yes _____ No
LDA permit needed:
_____ Yes _____ No

Date: _____

Plans Approved by the
ARCHITECTURAL REVIEW BOARD
Subject to the following:

_____
Signatures:

Plans Approved by the Board of Zoning Appeals: Date_____

NOTICE TO APPLICANTS AND OWNERS: The issuance of a permit is subject to appeal within thirty (30) days to the Board of Zoning Appeals. Incur expenses at your own risk, under permit, until right of appeal has elapsed.