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OFFICE USE ONLY
SUBMITTAL DATE _____
APPROVAL DATE _____
PERMIT # _____
FEES PAID _____

COMMERCIAL/INDUSTRIAL REMODEL PERMIT APPLICATION (2015 IEBC)

SIGNED AND SEALED DRAWINGS REQUIRED BY ARCHITECT/ENGINEER

BUILDING ADDRESS: _____ **ZONING:** _____

BUILDING OWNER: _____ **ADDRESS:** _____

PHONE NUMBER: _____

EMAIL ADDRESS: _____

(REQUIRED)

ENGINEER/ARCHITECT: _____ **ADDRESS:** _____

PHONE NUMBER: _____

EMAIL ADDRESS: _____

(REQUIRED)

TYPE OF IMPROVEMENT:

___ ADDITION/RENOVATION (UTILIZE 2015 EXISTING BLDG CODE ___ YES ___ NO)

___ CHANGE OF USE (UTILIZE 2015 EXISTING BLDG CODE ___ YES ___ NO)

BUILDING USE TYPE:

___ PRIVATE

___ PUBLIC

***Please note which section of the 2015 Existing Building Code the project will utilize for compliance.*

BUILDING REQUIREMENTS PER 2015 IEBC:

CONSTRUCTION TYPE: _____ USE GROUP: _____

SPRINKLERED___ NON-SPRINKLERED___

ALLOWABLE BUILDING HEIGHT: _____ ACTUAL BUILDING HEIGHT: _____

ALLOWABLE BUILDING AREA: _____ ACTUAL BUILDING AREA: _____

LOT SIZE _____ MAXIMUM OCCUPANT LOAD: _____ PERSONS

REQUIRED UTILITIES:

METERS WILL NOT BE ACTIVATED UNTIL OWNER FILLS OUT REQUIRED PAPERWORK IN THE UTILITY BILLING DEPARTMENT AT CITY HALL.

___ NEW GAS METER BTUH REQUIRED _____ (SEE GAS SERVICE APPLICATION)

___ EXISTING GAS METER BTUH REQUIRED _____

***ANY MODIFICATIONS TO **ANY** GAS PIPING IN THE BUILDING WILL BE REQUIRED TO PASS A 20#/10MIN PRESSURE TEST BEFORE GAS WILL BE TURNED ON TO THE BUILDING.*

___ NEW WATER METER SIZE REQUIRED _____ (SEE WATER/SEWER APPLICATION)

***ALL NEW WATER METER SETS MUST BE PLACED 6-10' OFF ROW ON PRIVATE PROPERTY*

___ EXISTING WATER METER

___ NEW WATER TAP SIZE REQUIRED _____ (SEE WATER/SEWER APPLICATION)

___ NEW SEWER TAP SIZE REQUIRED _____ (SEE WATER/SEWER APPLICATION)

REQUIRED UTILITIES (CONT'D):

CITIZENS ELECTRIC WILL NOT CONNECT SERVICE UNTIL ALL INSPECTIONS HAVE BEEN PERFORMED BY THE BUILDING DEPARTMENT. THE BUILDING DEPARTMENT WILL CONTACT CITIZENS ELECTRIC WHEN INSPECTIONS HAVE BEEN COMPLETED.

NEW ELECTRICAL SERVICE AMP PANEL _____
 REPLACE ELECTRICAL SERVICE AMP PANEL _____

MISCELLANEOUS:

SINK HOLE WITHIN 50' OF PROJECT YES NO
STREET CUT REQUIRED YES NO IF YES, SEE EXCAVATION PERMIT APPLICATION
BACKFLOW PREVENTER REQUIRED YES NO
OIL SEPARATOR REQUIRED YES NO
GREASE TRAP REQUIRED YES NO IF YES, WHAT SIZE _____ GAL
PLEASE SEE CITY GREASE POLICY ON INSTALLATION AND MAINTENANCE REQUIREMENTS

TRADES:

ALL INSTALLATION COMPANIES ASSOCIATED WITH THIS PROJECT ARE REQUIRED TO HOLD AN OCCUPATIONAL LICENSE THROUGH THE CITY OF PERRYVILLE COLLECTORS OFFICE. A STOP WORK ORDER WILL BE ISSUED FOR THE PROJECT IF ANY CONTRACTOR IS FOUND NOT TO HAVE AN APPROPRIATE LICENSE. NO INSPECTIONS WILL BE PERFORMED UNTIL PROOF OF LICENSE IS PROVIDED TO THE BUILDING DEPARTMENT.

AN EMAIL ADDRESS MUST BE PROVIDED FOR ANY CONTRACTOR CALLING IN FOR INSPECTION. ALL RESULTS OF INSPECTIONS AND QUESTIONS WILL BE SENT TO THE FOLLOWING EMAIL ADDRESSES AFTER AN INSPECTION HAS BEEN PERFORMED.

GENERAL CONTRACTOR COMPANY _____ LICENSE # _____
PHONE NUMBER: _____

SITE EXCAVATORS COMPANY _____ LICENSE # _____
PHONE NUMBER: _____

UTILITY INSTALLATION COMPANY _____ LICENSE # _____
PHONE NUMBER: _____

CONCRETE COMPANIES COMPANY _____ LICENSE # _____
PHONE NUMBER: _____

CARPENTRY (FRAME) COMPANY _____ LICENSE # _____
PHONE NUMBER: _____

PLUMBING CONTRACTORS COMPANY _____ LICENSE # _____
PHONE NUMBER: _____

ELECTRICAL CONTRACTORS COMPANY _____ LICENSE # _____
PHONE NUMBER: _____

MECH/HVAC CONTRACTORS COMPANY _____ LICENSE # _____
PHONE NUMBER: _____

CARPENTRY (FINISH) COMPANY _____ LICENSE # _____
PHONE NUMBER: _____



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INSULATION	COMPANY _____	LICENSE # _____
	PHONE NUMBER: _____	
MASONRY CONTRACTOR	COMPANY _____	LICENSE # _____
	PHONE NUMBER: _____	
ROOFING CONTRACTOR	COMPANY _____	LICENSE # _____
	PHONE NUMBER: _____	
EXTERIOR TRIM CONTRACTOR	COMPANY _____	LICENSE # _____
	PHONE NUMBER: _____	
FLATWORK CONTRACTOR	COMPANY _____	LICENSE # _____
	PHONE NUMBER: _____	
FIRE/SPRINKLER	COMPANY _____	LICENSE # _____
	PHONE NUMBER: _____	
OTHER	COMPANY _____	LICENSE # _____
	PHONE NUMBER: _____	

INSPECTIONS REQUIRED:

ANY CONTRACTOR FOUND NOT TO HAVE CALLED FOR PROPER INSPECTIONS, MAY BE REQUIRED TO REMOVE BUILDING MATERIALS THAT HINDER THE BUILDING DEPARTMENT FROM DOING ANY INSPECTION. THIS WILL BE AT CONTRACTORS EXPENSE. WORK SHALL NOT BE SCHEDULED TO OCCUR AFTER HOURS, WEEKENDS OR HOLIDAYS WITHOUT PRIOR APPROVAL OF BUILDING DEPARTMENT.

FOOTING DEPTH AND REINFORCEMENT PRIOR TO CONCRETE PLACEMENT (EROSION CONTROL IN PLACE)
 FOUNDATION WALL CONSTRUCTION/REINFORCEMENT PRIOR TO CONCRETE PLACEMENT
 UNDER SLAB PLUMBING
 ROUGH FRAMING
 ROUGH ELECTRICAL
 ROUGH PLUMBING
 FIREPROOFING
 GAS PIPING PRESSURE TEST
 SEWER/WATER TAP
 FINAL INSPECTION
 ISSUANCE OF LETTER OF OCCUPANCY

FEE SCHEDULE:

ESTIMATED CONSTRUCTION COSTS

OFFICE USE ONLY

BUILDING	\$ _____	FEE _____
PLUMBING	\$ _____	FEE _____
MECHANICAL	\$ _____	FEE _____
ELECTRICAL	\$ _____	FEE _____
SEWER CONNECTION FEE		FEE _____
WATER CONNECTION FEE		FEE _____
SEWER INSPECTION FEE		FEE \$40
TOTAL CONSTRUCTION COSTS=	_____	

TOTAL FEES DUE= _____

FEES PAID DATE: _____

SEE CITY ORDINANCE FOR TRACER WIRE REQUIREMENTS. ANY MO ONE CALL VIOLATIONS WILL BE ISSUED A CITATION FOR MUNICIPAL COURT, AND THE DIGGER IS LIABLE FOR DAMAGES.



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I HEREBY CERTIFY 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 WE AGREE TO CONFORM TO ALL APPLICABLE LAWS OF THIS JURISDICTION.

I HEREBY ACKNOWLEDGE THAT THE FOLLOWING ARE IN VIOLATION OF THE CODE OF ORDINANCES OF THE CITY OF PERRYVILLE: OPEN BURNING; FAILURE TO CONTACT DIG RITE 3 WORKING DAYS PRIOR TO DIGGING; FAILURE TO MAINTAIN PROPER OCCUPATIONAL LICENSE WITH THE CITY; STORAGE OF CONSTRUCTION MATERIAL ON CITY RIGHT-OF-WAY; AND ACCUMULATION OF MUD AND DEBRIS ON CITY STREETS. VIOLATIONS OF THE ABOVE MAY RESULT IN PROSECUTION IN MUNICIPAL COURT.

SIGNATURE OF APPLICANT

ADDRESS OF APPLICANT

APPLICATION DATE

