

Two sets of plans and specifications showing the scope of work must accompany this application. A plot plan must accompany plans showing free-standing structures or attached additions, indicating dimensions to side and rear property lines and existing structures on property.

LACK OF REQUESTED INFORMATION ON THIS FORM MAY CAUSE DELAY OF ISSUANCE FOR THIS PERMIT.

PLEASE PRINT CLEARLY.

		OFFICE USE ONLY	
PERMIT TYPE:		PERMIT NUMBER:	
DATE:		<input type="checkbox"/> FEE: \$	BAL DUE: \$
ESTIMATED COST:		DEPOSIT (Separate Check Req): \$	()

ADDRESS OF REQUESTED PERMIT WORK:	
SUBDIVISION / SHOPPING CENTER:	CONTACT NAME:
HOMEOWNER / BUSINESS NAME:	PHONE:
ADDRESS: ZIP CODE:	EMAIL:

CONTRACTOR:	CONTACT NAME:
ADDRESS:	PHONE:
CITY/STATE/ZIP:	EMAIL:
Are you a transient employer? <input type="checkbox"/> No <input type="checkbox"/> Yes (If yes, please provide a valid tax clearance from the Missouri Dept of Revenue)	

ARCHITECT:	CONTACT NAME:
ADDRESS:	PHONE:
CITY/STATE/ZIP:	EMAIL:

I, _____, OWNER / AGENT / CONTRACTOR, HEREBY MAKE APPLICATION TO THE CITY OF BALLWIN TO BUILD/INSTALL/ERECT, THE FOLLOWING: _____

NEW CONSTRUCTION – SINGLE FAMILY RESIDENCE

MASTER PLAN #	LOT #	NO. OF ROOMS:
DIMENSIONS:	SQ FOOTAGE:	NO. OF BEDROOMS:
STORIES:	HEIGHT:	NO. OF BATHS:
GARAGE: <input type="checkbox"/> 1 CAR <input type="checkbox"/> 2 CAR <input type="checkbox"/> 3 CAR <input type="checkbox"/> NOT APPLICABLE	BASEMENT TO BE FINISHED? Y N	

RETAINING WALL

NUMBER OF GRID LAYERS:
DISTANCE FROM WALKING SURFACE:

SEPARATE PERMITS REQUIRED (IF CHECKED)

<input type="checkbox"/> PLUMBING PERMIT
<input type="checkbox"/> ELECTRICAL PERMIT
<input type="checkbox"/> MECHANICAL PERMIT

I hereby certify that the information contained in this application and accompanying drawings or plats is correct, and that I will comply with all applicable laws of the City of Ballwin.

The undersigned warrants either (i) the plans have been approved by any applicable Board of Trustees, or other subdivision governing body; or (ii) that there is no relevant subdivision Board or Trustee group for which approval is required.

The undersigned acknowledges that failure to obtain proper subdivision approval may constitute grounds for denial or withdrawal of building permits and/or other city approval required for construction.

OWNER/AGENT/CONTRACTOR: _____ DATE: _____

<p>SEE ATTACHED HANDOUT:</p> <input type="checkbox"/> DECK <input type="checkbox"/> BASEMENT FINISH <input type="checkbox"/> ROOM ADDITION <input type="checkbox"/> RETAINING WALL <input type="checkbox"/> POOL/HOT TUB BARRIER REQ	<p style="text-align: center;">▶ REVIEWED ◀</p> <p style="text-align: center;">_____ PLANS EXAMINER</p> <p>Date: _____</p>
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PERMIT #

DATE:

FINALED:

ESCROW MAILED: