

For Office Use Only:
Permit # 20 42846
Approval Date: 10-9-14
Permit \$

## **DEMOLITION PERMIT APPLICATION**

Applicant: Randy Spalding Excavoting
Address:
Phone: 816-318-9500 Fax:
Location of the project:
Street address: 1300 SN Juffer Son
Legal description:
Required information:  Is the building to be partially or completely demolished? Partial Complete
Use of the building:Single family residential Two family Commercial building Other
Will the water service removed? (Complete demolition only)
Will the sanitary service be removed? (Complete demolition only)
Description of the building to be demolished: Single Family residential
Number of stories: Total square footage of the building:
Does the applicant own the structure to be moved? YesNo
The applicant shall furnish a certificate of liability insurance for personal and property damage exempting and saving harmless the city in a minimum amount of \$100,000 injury each person, \$300,000 each occurrence, and \$50,000 property damage.
AFFIDAVIT: I hereby certify that I have the authority to make the foregoing application and that the application, to the best of my knowledge, is complete and correct and that the permitted construction will conform to the regulations in the Codes adopted by the City of Lee's Summit and all applicable ordinances.
ECC. 6 Charnesk. 10(9/14
Signature of Owner on Authorized Agent Printed Name of Applicant Date
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