



## CODES ADMINISTRATION

<b>Building Permit - Commercial</b> <b>Project Title:</b> SAINT LUKES HOSPITAL PRE-OP HOLDING ROOM <b>Work Desc:</b> ALTERATION COMMERCIAL	<b>Permit No:</b> PRCOM20151029 <b>Date Issued:</b> May 19, 2015
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<b>Project Address:</b> 100 NE SAINT LUKES BLVD, LEES SUMMIT, MO 64086  <b>Legal Description:</b> SAINT LUKES HOSPITAL OF LEES SUMMIT LOTS 1 & 2---LOT 1 <b>Parcel No:</b> 524400440000000000  <b>County:</b> JACKSON	<b>Permit Holder:</b>  TURNER CONSTRUCTION COMPANY 250 W COURT STREET STE 450 CINCINNATI, OH 45202
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<b>Activities Included for this Project:</b> zAlteration Commercial, Above Ceiling Permit, In-Wall Inspection Permit, Alarm Permit, Electrical Permit Commercial, Mechanical Permit Commercial, Plumbing Permit Commercial,
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<b>Construction Type:</b>	<b>Occupancy:</b> INSTITTIONAL, INCAPACITATED <b>Valuation:</b> \$54,433.00	<b>Zoning District:</b> CP-2
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<b>Residential Area:</b>	
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<b>Commercial Area</b>	
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Issued By: _____ TM	Date: May 19, 2015
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THIS PERMIT IS ISSUED IN RELIANCE UPON INFORMATION SUBMITTED BY THE APPLICANT. THE BUILDING OFFICIAL MAY SUSPEND OR REVOKE WHENEVER THE PERMIT IS ISSUED IN ERROR, OR ON THE BASIS OF INCORRECT INFORMATION SUPPLIED, OR IN VIOLATION OF ANY ADOPTED CODE, CITY ORDINANCE OR REGULATIONS.  NOTICE: THE DISPOSAL OF DEMOLITION WASTE IS REGULATED BY THE DEPARTMENT OF NATURAL RESOURCES UNDER CHAPTER 260 RSMO. SUCH WASTE, IN TYPES AND QUANTITIES ESTABLISHED BY THE DEPARTMENT, SHALL BE TAKEN TO A DEMOLITION LANDFILL OR A SANITARY LANDFILL FOR DISPOSAL.
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Signature of Applicant: _____	Date: _____ 5/19/2015
Print name: _____	Company Name: _____ TURNER CONST