

CODES ADMINISTRATION

Building Permit - Commercial		Permit No: PRCOWIZU170788	
Project Title: LBP V-A		Date Issued: May 16, 2017	
Work Desc: NEW SHELL BUILDING			
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Project Address:		Permit Holder:	
2900 NE INDEPENDENCE AVE, LEES SUMMIT, MO 64064			
2500 HE HADEI ENDENCE TAVE, EEES SOMMANT, MIO 04004		CAPITAL CONSTRUCTION SERVICES LLC	
Legal Description: LAKEWOOD BUSINESS CENTER ON I 470,		2642 NE HAGAN RD	
LOTS 23A & 23B23A		LEES SUMMIT, MO 64064	
		LEES SUIVIIVIIT, IVIO 64064	
Parcel No: 52200013700000000			
Garanter IA CKCON			
County: JACKSON			
Activities Included for this Project:			
zNew Shell building, Right of Way, Above Ceiling Permit, Alarm Permit, Driveway Permit, Electrical Permit Commercial,			
Electrical Service Permit Commercial, Foundation Permit Commercial, Gas Permit Commercial, Gas Service Permit			
Commercial, In-Wall Inspection Permit, Mechanical Permit Commercial, Plumbing Permit Commercial, Sprinkler Permit,			
Sidewalk Permit,			
,			
Construction Type: Type IIB	truction Type: Type IIB Occupancy: NOT APPLICABLE Zoning District: CS		
(Unprotected) Valuation: \$2,100,0			Zonnig District: Co
(onprotected)	valuation. \$2,100,0	00.00	
Desidential Acces		1	
Residential Area:		<u>l</u>	
		1	
Commercial Area		41215	
Issued By:		Date: May 16, 2017	
THIS PERMIT IS ISSUED IN RELIANCE UPON	N INFORMATION SU	IBMITED BY THE APPI	ICANT, 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.			
SOFFEIED, OR IN VIOLATION OF ANY ADOFTED CODE, CITY ORDINANCE OR REGULATIONS.			
NOTICE: THE DISDOCAL OF DEMOLITION WASTE IS DECLIFATED BY THE DEPARTMENT OF MATHRAL DESCRIPCES LINDER			
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.			
Signature of			
Applicant:		Date:	
Print name:		Company Name:	
Company Name.			