

DEVELOPMENT SERVICES

Building Permit - Residential Project Title: Work Desc: ALTERATION SINGLE FAMILY	Permit No: PRRES20191892 Date Issued: August 20, 2019
---	--

Project Address: 2807 NW CHIPMAN RD, LEES SUMMIT, MO 64081 Legal Description: SEC-03 TWP-47 RNG-32---PT NE 1/4 DAF: BEG NW COR NE 1/4 TH S 03 DEG 29 MIN 10 SEC W 33.97' TH S 81 D POB TH S 81 DEG 22 MIN 06 SEC E 76.50' TH SELY ALG CURV TO LF RAD 2332.01' A DIST 340.06' TH S 00 DE E 75' TH SELY ALG CURV TO LF RAD 2000' A DIST 214.39' TH S 89 DEG 28 MIN 50 SEC W 501.38' TH N 00 D Parcel No: 62310020101000000 County: JACKSON	Permit Holder: KC ELECTRICAL CONTRACTORS, LLC 986 MOORE PL ODESSA, MO 64076
---	---

Activities Included for this Project: zAlteration Single Family, Solar Permit - Res,
--

Construction Type: Type VB (Unprotected)	Occupancy: RESIDENTIAL, ONE- AND TWO-FAMILY Valuation: \$16,740.00	Zoning District: AG
--	--	----------------------------

Residential Area:	
--------------------------	--

Commercial Area	sq. ft.
------------------------	---------

Issued By: _____ KB _____	Date: Aug 20, 2019
---------------------------	--------------------

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.

CONDITIONS

One or more divisions have conditions that have not been addressed during the review period. The outstanding conditions provided below shall be met as indicated during the construction period.

Fire Department Solar Review

- 1 Equipment cut sheets incomplete and/or illegible.

Action required: Submit cut sheets for all equipment, not just panels. (inverter, aggregate panel) The data provided must clearly show 3rd party approvals. (UL, etc.)

Residential Plan Review

Signature of

Applicant: _____

Date: __AUGUST 20, 2019_____

Print name: _____

Company Name: _KC ELECTRICAL CONTRACTORS_____