



## DEVELOPMENT SERVICES

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| <b>Building Permit - Residential</b><br><b>Project Title:</b><br><b>Work Desc:</b> NEW OTHER (RESIDENTIAL) | <b>Permit No:</b> PRRES20193671<br><b>Date Issued:</b> December 23, 2019 |
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| <b>Project Address:</b><br>4836 NE JAMESTOWN DR, LEES SUMMIT, MO 64064<br><br><b>Legal Description:</b> MONTICELLO 1ST PLAT LOTS 1-32 & TRS A-C---LOT 32<br><br><b>Parcel No:</b> 43130050200000000<br><br><b>County:</b> JACKSON | <b>Permit Holder:</b><br>DAVE RICHARDS HOMEBUILDING INC<br>PO BOX 1325<br>BLUE SPRINGS, MO 64013 |
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| <b>Activities Included for this Project:</b><br>zNew Other - Residential, Irrigation Permit, |
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|------------------------------------------|---------------------------------------------------|-----------------------------|
| <b>Construction Type:</b> Not Applicable | <b>Occupancy:</b><br><b>Valuation:</b> \$3,000.00 | <b>Zoning District:</b> R-1 |
|------------------------------------------|---------------------------------------------------|-----------------------------|

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| <b>Residential Area:</b> |  |
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|                        |         |
|------------------------|---------|
| <b>Commercial Area</b> | sq. ft. |
|------------------------|---------|

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|-----------------------------------|---------------------------|
| <b>Issued By:</b> _____ DME _____ | <b>Date:</b> Dec 23, 2019 |
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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.<br><br>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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## 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.

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| Licensed Contractors |
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|----------------------------------|------------------------------------------------------|
| Signature of<br>Applicant: _____ | Date: _____ 12-23-19 _____                           |
| Print name: _____                | Company Name: _____ DAVE RICHARDS HOMEBUILDING _____ |

