

DEVELOPMENT SERVICES

		.				
Building Permit - Residential			Permit No: PRRES20202006			
Project Title:		Date Issued: July 31	1, 2020			
Work Desc: NEW SINGLE FAMILY						
- · · · · · · · · · · · · · · · · · · ·		ntallaldam				
Project Address:		Permit Holder:				
1116 NE GOSHEN CT, LEES SUMMIT, MO	64064		SAB CONSTRUCTION INC			
	-: - 0	PO BOX 942				
Legal Description: MONTICELLO 3RD PLA	T LOTS 68-108 &	LEES SUMMIT, MO	64063			
TRACT G-JLOT 88						
Parcel No: 43130030300000000						
A THE PACKSON						
County: JACKSON						
Activities Included for this Project:						
zNew Single Family, Right of Way, License	e Tax, License Tax Cr	redit. Deck - Covered	Residential, Sidewalk Permit,			
	<u> </u>	- Ca, - 1 :	The state of the s			
Construction Type: Type VB	Occupancy: RESIDE	NTIAL ONF- AND	Zoning District: R-1			
(Unprotected)	TWO-FAMILY	.Nine, One	Zoning District it I			
(Onprotected)	Valuation: \$282,01	2 56				
	Valuation: y==-,-	.8.50	1			
Residential Area:		1				
Residential, Living Area		1600				
Residential, Un-Finished basements		596				
Residential, Finished basements		954				
Residential, Decks		108				
Residential, garage		744				
Nesidential, Barage		/				
Commercial Area		2554 sq. ft.				
Commercial Area		2334 34. 16.				
THIS PERMIT IS ISSUED IN RELIANCE UPO	IN INFORMATION SU	IRMITED BY THE APP	LICANT THE RUII DING OFFICIAL MAY			
SUSPEND OR REVOKE WHENEVER THE PE						
SUPPLIED, OR IN VIOLATION OF ANY ADD						
NOTICE: THE DISPOSAL OF DEMOLITION	·					
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.						
DEMOCRITION DWGD.122 CC.	AND THE TOTAL DESCRIPTION OF THE PERSON OF T	JAL.				
	COND	DITIONS				
	COND	HIIUNS				
One arrange divisions have conditions th	t at have not hoon a	ddiseased during the	The outstanding			
One or more divisions have conditions the		_				
conditions provided below shall be met as indicated during the construction period.						
Signature of						
Applicant:		Date:				
Print name:		Company Name:				