

**DEVELOPMENT SERVICES**

<b>Building Permit - Commercial</b> <b>Project Title:</b> LEE'S SUMMIT SURGICAL CENTER - WATER DAMAGE REPAIR <b>Work Desc:</b> REPAIR REPLACE UPGRADE	<b>Permit No:</b> PRCOM20210023 <b>Date Issued:</b> January 04, 2021
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<b>Project Address:</b> 2861 NE INDEPENDENCE AVE, LEES SUMMIT, MO 64064  <b>Legal Description:</b> I-470 BUSINESS & TECHNOLOGY CENTER LOT 15A---LOT 15A  <b>Parcel No:</b> 52200013900000000  <b>County:</b> JACKSON	<b>Permit Holder:</b> EXCEL CONSTRUCTORS, INC 8041 W 47TH ST OVERLAND PARK, KS 66203
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<b>Activities Included for this Project:</b> License Tax, License Tax Credit, zRepair/Replace/Upgrade, Alarm Permit, Electrical Permit Commercial, Sprinkler Permit, Fire Rated Assemblies Permit,
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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.

**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.**

Signature of Applicant: _____	Date: <u>1/4/21</u> _____
Print name: _____	Company Name: EXCEL CONSTRUCTORS, INC _____