



LEE'S SUMMIT MISSOURI

PERMIT APPLICATION (COMMERCIAL BUILDINGS/TENANT FINISH)

Revised 01/27/15

APPLICANT, PLEASE COMPLETE ALL OF THE FOLLOWING INFORMATION (PLEASE PRINT):

- 1) Project Name: Lakewood Orthodontics
- 2) Project Address: 1399 NE Douglas St. Lees Summit, MO 64086
- 3) Scope of Work (New Bldg., Bldg. Addition, Tenant Finish, etc): Tenant Finish
- 4) Number of Submitted Plans: _____ Specs: _____ Struct Calcs: _____ Soils Rpts: _____
Additional information submitted: _____
- 5) Final Development Plan Tracking Number: _____ Date Applied For: _____

PLEASE LIST ADDRESS TO WHICH CODES ADMINISTRATION IS TO SEND PLAN REVIEW COMMENTS:

- 6) Applicant's Name: Dev Inc.
 Primary Contact: Dev Inard Phone: 816-898-3557 Email: dev@dev-inc.com
 On-site Contact: Jason Phone: 913-203-5215 Email: jason@dev-inc.com
 Address: 8807 Monrovia St.
 City, St., Zip: Lenexa, KS 66215
- 7) Design Professional in Responsible Charge: Kevin Campbell
 Company Name: Dev Inc.
 Address: 8807 Monrovia St.
 City, St., Zip: Lenexa, KS 66215
 Phone Number: 816-854-0700 Fax Number: none
 E-mail: Kevin@dev-inc.com

COMMERCIAL BUILDING PERMITS WILL ONLY BE ISSUED TO COMPANIES LICENSED IN THE CITY OF LEE'S SUMMIT AS A MINIMUM OF A CLASS B GENERAL CONTRACTOR.

ALL PLANS MUST BE DRAWN TO SCALE AND BEAR THE SEAL OF AN ARCHITECT/ENGINEER REGISTERED IN THE STATE OF MISSOURI. PARTIAL PERMIT FEES SHALL BE DETERMINED AS SEPARATE PERMIT FEES. DIVIDING A JOB INTO TWO OR MORE PARTIAL PERMITS WILL RESULT IN HIGHER TOTAL PERMIT FEES THAN ONE FULL PERMIT. RESUBMITTAL PLANS REVIEW FEES MAY BE DUE WHEN PREVIOUSLY IDENTIFIED DEFICIENCIES REMAIN UNCORRECTED ON SUBSEQUENT SUBMITTALS.

Project Valuation

Total Project Valuation (Plus Mech, Plbg, Elec, Sprklr, Etc., Excluding Site Improvements and property):*

\$204,000.00 (Demo \$20,000)

*PROVIDE SEPARATE TOTAL PROJECT AND BUILDING VALUATIONS. IF THE PROJECT CONTAINS SEPARATE BUILDINGS, PERMIT FEES SHALL BE CALCULATED SEPARATELY FOR EACH BUILDING.

Tenant Information:

Provide a description of the proposed use for the space. Indicate the nature of the business and the type of daily activities to be performed. Indicate the type of materials to be stored in type S occupancies and how they will be stored. If this is a spec building, indicate the type of tenants anticipated.

Orthodontist office 2300 sqft of 4000 sqft. Request to get demo permit while tenant finish under review.

No med gas.

Special Inspections:

List applicable types of work which require Special Inspection per the International Building Code, Chapter 17.

- Placement of Reinforced Concrete
- Testing of Reinforced Concrete
- Placement of Reinforced Steel
- Prestressing Concrete
- Bolts installed in Concrete
- Verification of Soils
- Excavation and Filling
- Drilled Piers or Piles
- Earth Retaining Structure
- Inspection of Precast Fabricator
- Erection of Precast Concrete
- Structural Welding
- High Strength Bolting
- Steel Frame Inspection
- Inspection of Structural Steel Fabricator
- Inspection of Metal Building Fabricator
- Sprayed Fire Resistant Materials
- Structural Masonry
- EIFS Insulation/Finish System
- Smoke Control System
- Seismic Resistance
- Other _____

N/A

Deferred submittals:

- Truss design package
- Metal building design package
- Precast concrete design package
- Fire suppression system design package
- Fire alarm system design package

N/A

E. PAYMENT OF THE LICENSE TAX

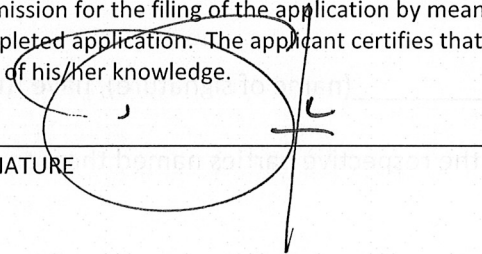
RESIDENTIAL: PAYMENT OF THE LICENSE TAX IS DUE **PRIOR** TO THE ISSUANCE OF THE BUILDING PERMIT AND IS TO BE **PAID IN THE TREASURY DIVISION OF THE FINANCE DEPARTMENT**. A COPY OF THE LICENSE TAX BILL CAN BE OBTAINED FROM THE CODES ADMINISTRATION DEPARTMENT WITHIN THE TIME PERIOD POSTED. THE LICENSE TAX IS A SURCHARGE TO THE ANNUAL BUSINESS LICENSE TAX.

NON-RESIDENTIAL/SHELL: PAYMENT OF THE LICENSE TAX IS DUE **PRIOR** TO THE ISSUANCE OF A TENANT CERTIFICATE OF OCCUPANCY FOR BUILDINGS APPROVED AS NON-RESIDENTIAL/SHELL AND IS TO BE **PAID IN THE TREASURY DIVISION OF THE FINANCE DEPARTMENT**. A COPY OF THE LICENSE TAX BILL CAN BE OBTAINED FROM THE CODES ADMINISTRATION DEPARTMENT WITHIN THE TIME PERIOD POSTED. THE LICENSE TAX IS A SURCHARGE TO THE ANNUAL BUSINESS LICENSE TAX.

NON-RESIDENTIAL/NON-SHELL: PAYMENT OF THE LICENSE TAX IS DUE **PRIOR** TO THE ISSUANCE OF A CERTIFICATE OF OCCUPANCY AND IS TO BE PAID IN THE TREASURY DIVISION OF THE FINANCE DEPARTMENT, UNLESS THE PAYMENT PLAN OPTION IS SELECTED. (SEE BELOW.) A COPY OF THE LICENSE TAX BILL CAN BE OBTAINED FROM THE CODES ADMINISTRATION DEPARTMENT WITHIN THE TIME PERIOD POSTED. THE LICENSE TAX IS A SURCHARGE TO THE ANNUAL BUSINESS LICENSE TAX.

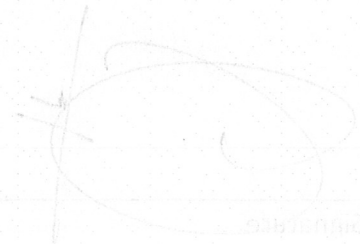
The application must be signed by the legal owner of the building contractor company. The building contractor may grant permission for the filing of the application by means of a signed and notarized affidavit to that effect, submitted with the completed application. The applicant certifies that the information provided in this application is true and correct to the best of his/her knowledge.

SIGNATURE

A handwritten signature in black ink, consisting of a large, stylized 'C' shape with a vertical line through it, positioned above a horizontal line.

DATE

August 16, 2021

A very faint, illegible handwritten signature or mark in the lower right quadrant of the page.

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8/16/21

LICENSE TAX APPLICATION

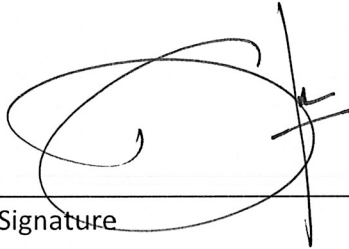
AFFIDAVIT

I, the undersigned, Dev Anand (legal owner of building contractor company) duly authorized and acting legal representative of _____ (building contractor firm), do hereby

certify as follows:

I have examined the attached license tax application and the manner of execution thereof, and I am hereby granting authority to the said representative listed below to sign the said application on behalf of the building contractor firm.

Said representatives, _____ (name of signature), have full power and authorize to execute said application on behalf of the respective parties named thereon.



Signature

Dev Anand President

Name and Title (type)

8/16/21.

Date