

## CITY OF LEE'S SUMMIT

## **CODES ADMINISTRATION**

220 SE GREEN ST. P.O.BOX 1600 Lee's Summit, MO 64063 PHONE: 816-969-1200

FAX: 816-969-1201

| 1   3   1   1   1   1   1   1   1   1  |                                    | Permit No: PRCOM20110629           |                  |  |
|--|------------------------------------|------------------------------------|------------------|--|
| Project Title: Work Desc: Re-Roof  |                                    | Date Issued: April 14, 20          | J11<br>          |  |
| Work Desc. Ne-Nooi   |                                    |                                    |                  |  |
| Project Address:<br>1421 SW MANOR LAKE DR, LEES SUMMIT, MO   |                                    | Permit Holder:                     |                  |  |
| 64082<br>1423 SW MANOR LAKE DR, LEES SUMMIT, MO  |                                    | ARG ROOFING<br>1340 W 149TH ST     |                  |  |
| 64082<br>1425 SW MANOR LAKE DR, LEES SUMMIT, MO  |                                    | OLATHE, KS 66061                   |                  |  |
| 64082  |                                    |                                    |                  |  |
| 1427 SW MANOR LAKE DR, LEES SUMMIT, MO<br>64082  |                                    |                                    |                  |  |
| 1429 SW MANOR LAKE DR, LEES SU<br>64082  | JMMIT, MO                          |                                    |                  |  |
| 1431 SW MANOR LAKE DR, LEES SU<br>64082  |                                    |                                    |                  |  |
| 1433 SW MANOR LAKE DR, LEES SUMMIT, MO<br>64082  |                                    |                                    |                  |  |
| 1435 SW MANOR LAKE DR, LEES SUMMIT, MO<br>64082  |                                    |                                    |                  |  |
| 1437 SW MANOR LAKE DR, LEES SUMMIT, MO<br>64082  |                                    |                                    |                  |  |
| 1439 SW MANOR LAKE DR, LEES SU<br>64082  | JMMIT, MO                          |                                    |                  |  |
| Legal Description: ARBORWALK - 1ST   |                                    |                                    |                  |  |
| Parcel No: 69640480100000000   |                                    |                                    |                  |  |
| County: JACKSON  |                                    |                                    |                  |  |
| Activities Included for this Project: Roofing Permit,  |                                    | •                                  |                  |  |
| Construction Type: Not Applicable  | Occupancy: I family Valuation: \$3 | Residential, multiple<br>87,500.00 | Zoning District: |  |
| Residential Area:  |                                    |                                    |                  |  |
| Commercial Area  |                                    |                                    |                  |  |
| Issued By: DRB   |                                    | Date: Apr 14, 2011                 |                  |  |
| THIS PERMIT IS ISSUED IN RELIANCE UPON INFORMATION SUBMITED 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 |                                    |                                    |                  |  |
| INOTICE: THE DISPOSAL OF DEMOLI  | HON WAS IF                         | IS REGULATED BY THE                | DEPARIMENT()F    |  |

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. |                  |  |
|---------------------------------|------------------|--|
| G                               |                  |  |
| Signture of Applicant:          | Date:            |  |
| Print Applicant Name:           | Company<br>Name: |  |