



LEE'S SUMMIT MISSOURI

For Office Use Only:

Permit #	
LT #	
Permit \$	
LT \$	
Total \$	

Lee's Summit Residential Permit Application

Applicant:	<u>LandRock Signature Homes, LLC</u>		
Address: (No P.O. Boxes)	<u>4335 McGEE ST.</u>		
City:	<u>KANSAS CITY</u>	State:	<u>MO</u> Zip: <u>64111</u>
Primary Contact:	<u>JP Roberts</u>	Phone:	<u>816.969.5588</u> Email: <u>jproberts23@hotmail.com</u>
On-Site Contact:	<u>" "</u>	Phone:	<u>" "</u> Email: <u>" "</u>
Project Location:	<u>LOT 124, PERGOLD PARK 5TH ADD</u>		
	<u>(Address) 1121 SW CORINTHIAN PL., LS, MO 64081</u>		

Please check Yes or No for each question:

	Yes	No	
Will the house be built as a walk-out?	☐	☒	If No, a sump pump will be required.
Is a Flood Plain Certificate required?	☐	☒	Answer Yes if a 100 year flood plain intersects a lot line.
Is there a drainage swale required?	☐	☒	Answer Yes if a 100 year flood plain intersects a lot line.
Are you building on fill?	☐	☒	If Yes, a soils report is required prior to footing inspection.
Are you installing a suspended slab?	☒	☐	If Yes, design must be included with construction documents.
Are you using an engineered floor syst.?	☐	☒	If Yes, design must be approved. (see reverse info)
Are you using Roof Trusses?	☐	☒	If Yes, design must be approved. (see reverse info)
Are you installing a Cement/Tile Roof?	☐	☒	If Yes, design must be included with construction documents.

Check items to be deferred. (see reverse for deferral submittal requirements)

- ☐ Engineered floor system
☐ Roof trusses
☐ Other (provide list) _____

Please supply the square footage for each of the following areas, where applicable.

1st Floor:	<u>2030</u>	2nd Floor:	<u>1130</u>	3rd Floor:	<u>-</u>	Unfin. Bsmt:	<u>1482</u>
Fin. Bsmt:	<u>1324</u>	Garage:	<u>730</u>	Covered Deck:	<u>230</u>	Uncovered Deck:	<u>-</u>

Size of water meter service (if other than standard 5/8"x3/4")? _____

Size of electric (if other than 200 amp)? _____

MEP Subcontractor Information:

(Note: Permit shall not be issued until MEP sub-contractors are licensed and listed on permit)

Mechanical: MIDWEST Electrical: Princeton Electric Plumbing: Country

(Continued on reverse) HEATING & COOLING ? LIGHTING DESIGN PLUMBING



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Lee's Summit Residential Permit Application (continued)

Submittals for new homes shall include the following:

- (2) copies of a plot plan prepared and sealed by Missouri State design professional.
- Completed Residential Permit Application.
- Completed Excise Tax Form.
- (2) copies of construction documents* prepared by registered design professional licensed by the State of Missouri and sealed in accordance with Missouri Board for Architects, Prof. Engineers, Prof. Land Surveyors and Prof. Landscape Architects.

* Construction documents shall be specific to the listed address and not to be used at any other location.

Deferred submittal requirements: (Trusses, engineered joists, etc.)

When approved by the building official some portions of the design may be deferred. The registered design professional in responsible charge shall list the deferred submittals on the construction documents for review by the Building Official. Submittal documents for deferred submittal items shall be submitted to the registered design professional in responsible charge who shall review them and forward them to Development Services office with a notation/stamp/similar indicating that the deferred submittal documents have been reviewed and that they have been found to be in general conformance with the design of the building.

AFFIDAVIT: I hereby certify that I have the authority to make the foregoing application and that the application, to the best of my knowledge, is complete and correct and that the permitted construction will conform to the regulations in the Codes adopted by the City of Lee's Summit and all applicable ordinances.

Signature of Owner or Authorized Agent

Printed Name of Applicant

Date

For office use only:

Roof Material: _____
of Bedrooms: _____
of Units: _____
of Bathrooms: _____

of Floors: _____
s.f. of Finished Area _____
Sidewalk (Y/N): _____
of Traps: _____