

## **DEVELOPMENT SERVICES**

|  | Permit No: PRCOM20224909            |
|--|-------------------------------------|
| Project Title: MEGA STORAGE - BUILDING #6<br>Work Desc: NEW COMMERCIAL | Date Issued: June 21, 2023          |
|  |                                     |
| Project Address:   | Permit Holder:                      |
| 520 NE TOWN CENTRE DR, Unit:F, LEES SUMMIT, MO 64064                   | PELLA BUILDING SYSTEMS INCORPORATED |
|  | 906 W 9TH ST                        |
| Legal Description: LEES SUMMIT TOWN CENTRE LOT 1A-1C                   | PELLA, IA 50219                     |
| AND TRACT A LOT 1A   | ,                                   |
| Parcel No: 270041  |                                     |
|  |                                     |
| County: JACKSON  |                                     |

## Activities Included for this Project:

zNew Commercial, License Tax, License Tax Credit, Water, Paved Surface, Storm Sewer, Site Grading,

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 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.

Fire Plan Review

1 2018 IFC 906.2- General requirements. Portable fire extinguishers shall be selected, installed and maintained in accordance with this section and NFPA 10.

Action required- Provide a 2A:10B:C fire extinguisher in each unit. Verified at inspection.

**Building Plan Review** 

Licensed Contractors

| Signature of<br>Applicant: | Date:         |
|----------------------------|---------------|
| Applicant                  | Date          |
| Print name:                | Company Name: |

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