



DEVELOPMENT SERVICES

Building Permit - Commercial Project Title: SAINT LUKE'S EAST - NUC-MED RENOVATION Work Desc: ALTERATION COMMERCIAL	Permit No: PRCOM20231513 Date Issued: June 26, 2023
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Project Address: 100 NE SAINT LUKES BLVD, LEES SUMMIT, MO 64086 Legal Description: SAINT LUKES HOSPITAL OF LEES SUMMIT LOTS 1 & 2---LOT 1 Parcel No: 524400440000000000 County: JACKSON	Permit Holder: MCCARTHY BUILDING COMPANIES INC 12851 MANCHESTER RD ST LOUIS, MO 63131-1802
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Activities Included for this Project: zAlteration Commercial, License Tax, License Tax Credit, Alarm Permit, Electrical Permit Commercial, Mechanical Permit, Plumbing Permit Commercial, Sprinkler Permit,

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.

Licensed Contractors

Building Plan Review

Fire Plan Review

1 2018 IFC 901.2- Construction documents. The fire code official shall have the authority to require construction documents and calculations for all fire protection systems and to require permits be issued for the installation, rehabilitation or modification of any fire protection system. Construction documents for fire protection systems shall be submitted for review and approval prior to system installation.

Provide shop or as built drawings for review and approval. All sprinkler and alarm notification coverage will be verified at inspection.

Signature of Applicant: _____	Date: _____
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Print name:

Company Name:
