APPLICATION FOR PLAN EXAMINATION & BUILDING PERMIT
COMMERCIAL

Application/Permit Number _____ ***Appl. Date*** _____
Date Approved _____ ***By*** _____ ***Fee$*** _____

IMPORTANT – Applicant must complete all pertinent items in each section.

Construction Address_____ Zoning District _____

PERMIT TYPE

- ☐ New Construction
- ☐ Fire Repair
- ☐ Building Addition
- ☐ Retaining Wall (onsite)
- ☐ Tenant Finish
- ☐ Interior Remodel
- ☐ Demolition
- ☐ Plumbing
- ☐ Mechanical
- ☐ Electrical
- ☐ Tornado Repair

Architect/Engineer_____Phone #_____

Address_____E-Mail_____

City, State & Zip_____Cell #_____

Contractor/Applicant_____Phone #_____

Address_____E-Mail_____

City, State, Zip _____Cell #_____

PLEASE CALL _____WHEN PERMIT IS READY TO BE PICKED UP (PHONE _____)

Inspection Contact: _____Phone #_____

E-Mail_____

All Contractors listed must hold a current/active City of Joplin License(s)

General Cont._____Phone #_____Joplin Lic. #_____

Electrical Cont._____Phone #_____Joplin Lic. #_____

Plumbing Cont._____Phone #_____Joplin Lic. #_____

Mech. Cont._____Phone #_____Joplin Lic. #_____

Gas Cont._____Phone #_____Joplin Lic. #_____

Fire Sprinkler_____Phone #_____Joplin Lic. #_____

Alarm Contractor_____Phone #_____Joplin Lic. #_____

COST

Cost of improvement (omit cents).....→ $_____

PRINCIPLE FRAMING (PLEASE BE SPECIFIC)

Foundation_____

Exterior Walls_____

Interior Walls_____

Fire Wall/Barriers_____

Roof Structure_____

Is building sprinkled?_____

If yes, to what standard?_____

Height of Building_____

How Many Stories_____

How Many Basement Levels_____

Total Square footage of the building, incl. all floors and/or tenant spaces._____

Total SF of the remodel/addition_____

SITE OR PLOT PLAN OR KEY PLAN SHOWING LOCATION WITHIN A BUILDING OR STRIPMALL
Commercial - Applicant must submit three (3) full sets of plans. If project is a food related service, 1 (one) set of plans will be submitted to the Joplin Health Dept. for review.

For new buildings and additions you must submit a property survey or survey plat with dimensions of all structures and distances from structures to lot lines, utility easements (U/E), etc. For interior remodel a key plan must be submitted to show location within the building and pertinent information such as existing restrooms, water fountains, mop-sink, etc. Buildings shall be built to the 2018 International Building Code, 2017 NEC and ANSI 2009 for accessibility.

V. IDENTIFICATION - To be completed by ALL Applicants

Owner/Lessee_____Phone #_____Fax #_____

Address_____City, State, Zip_____

Cell Phone #_____ Email: _____

UNDER PENALTY OF INTENTIONAL MISREPRENTATION AND/OR PERJURY, I declare that I have examined and/or made this application and it is true and correct to the best of my knowledge and belief. I agree to construct said improvements in compliance with all provisions of the applicable ordinances. I further certify that all easements, deed restrictions or other encumbrances restricting the use of the property are shown on the site plans submitted with this application. I have been given authorization from the property owner to obtain this permit. I realize that the information that I have affirmed hereon forms a basis for the issuance of the permit herein applied for and approval of plans in connection therewith shall not be construed to permit any construction upon said premises or use thereof in violation of any applicable ordinance or to excuse the owner or his or her successors in title from complying therewith. The permit shall be valid for one (1) year and shall be null and invalid if the authorized work is not commenced within six (6) months after issuance of a permit, or if the authorized work is suspended or abandoned for a period of six (6) months after the time of issuing the permit. I certify I have read and fully understand these conditions.

Applicant Signature_____Date_____

UPON APPROVAL OF FINAL INSPECTIONS
PLEASE CALL EXTENSION 521 FOR CERTIFICATE OF OCCUPANCY
Please include permit number and address of property
PLEASE ALLOW 48 HOURS FOR PROCESSING
Fax Number is 417-625-4738
Phone Number for Inspections 417-624-0820 x 1521
Plan Review and Code Questions 417-624-0820 x 1523

Was this structure built before 1978?_____
If yes, is the Contractor EPA Certified in Lead Safe Renovation, Repair and Painting?_____Certification Number_____