



105 E. Center Street
Sikeston, MO 63801
573-471-2512
www.Sikeston.org

RESIDENTIAL BUILDING PERMIT APPLICATION

PROPERTY ADDRESS/LOCATION: _____

PROJECT DESCRIPTION: _____

CLASSIFICATION OF WORK (MARK ALL THAT APPLY):
NEW ADDITION ALTERATION DEMO REPAIR

APPLICANT/PROJECT CONTACT:
MAILING ADDRESS: _____

TELEPHONE: _____

PROPERTY OWNER NAME:
MAILING ADDRESS: _____

TELEPHONE: _____

GENERAL CONTRACTOR:
MAILING ADDRESS: _____

TELEPHONE: _____

(Site Plan Required) (Scaled Floor Plan Required) – 2 sets each
Site Plan should be drawn to scale (note which scaled used), driveway location indicated to scale, shall indicate all property dimensions, shall indicate building layout with the front, side and rear building setbacks to property lines, shall include road location, shall include easement and setback locations, shall delineate the required location and number of parking spaces (if required for the use proposed) and Directional North arrow
Floor plan should be drawn to scale (note which scaled used), should indicate panel box location & room measurements; Plans for each level of the structure should be included & basement egress windows marked

Flood Plain (Yes/No) _____ Concrete Slab or Crawl Space _____

NET SQ FT (HEATED) _____ GROSS SQ FT _____ TOTAL COST OF CONSTRUCTION _____

BUILDING SETBACKS FROM PROPERTY LINE
_____ FRONT _____ BACK _____ LEFT SIDE _____ RIGHT SIDE

Total # of Rooms (bedrooms, Kitchen, Living) _____

Electric (size of panel) (from what to what) _____

Plumbing (# of baths/kitchen/sinks/toilets) _____

SPRINKLER SYSTEM Yes No

BASEMENT Yes No FINISHED BASEMENT Yes No

Gas Yes No Pipe Size at meter _____ Length to 1st app _____ Connection Size _____ # Appliances _____

Contractors: List Business Name, Owner Name, Address & phone of contractor for each trade

Concrete	
Excavator	
Drywall/sheetrock	
Electrical	
Framing	
HVAC	
Painter	
Plumbing	
Masonry	
Fire Sprinkler	
Roofer	
Other	

***Note – All contractors must have a valid City Business/Contractor’s License prior to the issuance of a permit & prior to the start of work**

Notice:

Work shall not proceed until the Inspector has approved the various stages of construction. The permit becomes null and void if work or construction authorized is not commenced within (30) days or if construction or work is suspended or abandoned for a period of one hundred & eighty (180) days at any time after your work has commenced.

The permit must be posted on-site in a water proof sleeve. The site address must be visible from the street. Any finished basement shall be covered under this permit. Any unfinished basement will need a separate permit at the time basement is finished.

This permit conveys no right to occupy any street, alley or sidewalk or any part thereof, either temporarily or permanently. Encroachments on public property not specifically permitted under the building code, must be approved by the jurisdiction. Street or alley grades as well as depth and location of public sewers may be obtained from the department of public works. The issuance of this permit does not release the applicant from the condition of any applicable subdivision restrictions.

By signing this permit you agree to comply with ALL Building Codes, Zoning, FEMA, DNR and City of Sikeston regulations and rules. Construction and demolition waste shall be disposed of in a sanitary landfill or other authorized sites as per DNR Regulations. All construction shall conform to City of Sikeston’s Storm water Management and Land Disturbance Ordinance #5816. Contractors are to install and maintain erosion controls such as silt fencing as well as other methods to keep sediment on the site. Each aspect of the construction Site Runoff Control will be enforced as part of the construction site inspection process.

I hereby certify that I have read and examined the application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Signature of Contractor or Authorized Agent: _____ Date: / /

Signature of Owner: _____ Date: / /

OFFICE USE:

Bldg Use Group	Zoning District :	
Date Received:	<u>Land Disturbance App Submitted</u>	<u>Plan Review Complete</u>