



Building Permit Application

Accessory Building/Deck/Patio

Community Development Department
 Phone: (417) 732-3150
 Email: permits@republicmo.com

Application Date: _____		Permit No: _____	
Site Information		Site Address: _____	
Legal Description <i>(office use only)</i>	PIN: _____	Lot Number: _____	Subdivision: _____ Zoning: _____
Owner Information		Name: _____	
Address: _____		City: _____	State: _____
Email Address: _____		Phone Number: _____	Zip: _____
Contractor Information		Name (Contact Person): _____	
Name (Company): _____		Business License: _____	
Address: _____		City: _____	State: _____
Email Address: _____		Phone Number: _____	Zip: _____
Project Information			
Accessory Building		Deck	Patio
Dimensions: _____ by _____ = _____ sq. ft.		Dimensions: _____ by _____ = _____ sq. ft.	
Total square footage of all existing Accessory Buildings/Structures onsite: _____ sq. ft.		Will the finished project:	
Overall height of the Accessory Building: _____ ft.		Connect to a main doorway?	Yes No
Will the finished project:		Provide disabled access?	Yes No
Require electrical?	Yes No	Include stairs or a ramp?	Yes No
Require plumbing?	Yes No	Be covered?	Yes No
		Require electrical?	Yes No
		Require plumbing?	Yes No
Project Description: _____			

By signing this application form, I hereby acknowledge that the information I have provided is complete and accurate to the best of my knowledge. Furthermore, I acknowledge my responsibility to conform to the applicable federal, state and local regulations pertaining to the project described by this application and attachments. I also understand that this application will expire within 180 days of the date of my signing, unless extended in writing by the Building Official.

Date: _____ Name (please print): _____ Signature: _____

OFFICE USE ONLY

Permit Type: _____

Building Code Review	Approved	Denied
Comments: _____		
Type of Construction: _____	FACP: YES NO	FSS: YES NO
Use Group: _____	Use Classification: _____	
Signature: _____	Date: _____	
Zoning Code Review	Approved	Denied
Comments: _____		
Signature: _____ Date: _____		
Floodplain Review	Approved	Denied
Comments: _____		
Signature: _____ Date: _____		
Fire Code Review	Approved	Denied
Comments: _____		
Signature: _____ Date: _____		
Public Works Review	Approved	Denied
Comments: _____		
Signature: _____ Date: _____		

Approved by _____ on _____

Permit	Fees
Issued: _____	Penalty Fee YES NO
Expires: _____	Assessed
Extension: _____	Fee Total \$ _____.