



Permit Number: \_\_\_\_\_  
 Date Submitted: \_\_\_\_\_  
 Date Printed: \_\_\_\_\_

**RESIDENTIAL BUILDING PERMIT APPLICATION**

- Allow 48 hours for permit processing.
- **Before beginning** any excavation, **contact Missouri One Call at 1-800-344-7483** to locate underground utilities.
- Issuance of Permit does not guarantee approval of project or confer approval of any named contractor.
- Issuance of Permit does not grant right to owner/contractor to violate any City, State or Federal law or home owners association agreement that may be in place for said property.
- Questions? Contact – City of Bolivar Building Inspector, Kyle Lee: 417-328-5826, klee@bolivar.mo.us or Permit Technician, Lacy Hamby: 417-328-5825, lhamby@bolivar.mo.us

I certify the following information provided is accurate to the best of my knowledge and accurately represents the proposed work to be done. I understand this application must be fully completed, including all signatures, before a permit will be issued. I further understand that the City will not issue a permit if any contractor does not have a city business license.

In addition, I understand this permit application shall be deemed expired 180 days after the date of filing unless such application has been pursued in good faith or a permit has been issued. The Building Official, at his discretion, is authorized to grant an extension to this application. However, a request for an extension must be submitted in writing prior to the expiration date. This is the only notice I will receive for the renewal of the application and keeping the application valid is my responsibility.

Applicant Name: \_\_\_\_\_  
please print please sign date

Project Contact Person: \_\_\_\_\_ Project Address: \_\_\_\_\_

Project Contact Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

Property Owner Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**DESCRIPTION OF WORK**

- The City of Bolivar has adopted the following building codes: 2021 ICC codes, 2017 NEC.
- No structure may be located in a drainage or utility easement.
- When the permit is picked up, a site plan with acceptable locations may be provided.
- New Const. & Additions - Supply a site plan showing distances to all lot lines and existing structures. (Hand drawn acceptable)
- New Const. & Additions may require a completed Building Materials Guide.

**STRUCTURE** | TYPE OF CONSTRUCTION, check all that apply:

New Single-Family Dwelling     New Two-Family Dwelling     Remodel     Addition     Electrical Srvc.

\* For New Construction, Remodels and Additions please include a completed Site Plan showing lot lines.

Deck     Pool     Shed     Carport     Detached Garage/Accessory Building     Driveway Apron

Demolition: What type of structure is planned to be demolished? \_\_\_\_\_

Re-roof: What is the existing roofing material? \_\_\_\_\_

What will be the new roofing material? \_\_\_\_\_

Will repairs to decking occur / Other construction for roofing project?  Yes  No

If Re-roofing, over existing roof material, total number of layers when completed?  1  2  3+

Other, please specify: \_\_\_\_\_

**STRUCTURE** | PERMITS NEEDED, check all that apply:

Structural     Mechanical     Electrical     Plumbing     Fire Protection

**STRUCTURE** | SIZE OF CONSTRUCTION:

Square footage of entire residence as it exists (including basement, garage, porches, etc): \_\_\_\_\_

**Total Square foot of project under roof:** \_\_\_\_\_ **Estimated cost of construction:** \_\_\_\_\_

(Include all floors, basement, porches, garages, etc.)

<b>SIGN</b>	<ul style="list-style-type: none"> <li>• No sign, including banners, shall be located in the right-of-way or the sight triangle.</li> </ul>
	Sign Type Check all that apply:
	<input type="checkbox"/> Ground <input type="checkbox"/> Wall <input type="checkbox"/> Temporary Ground <input type="checkbox"/> Banner <input type="checkbox"/> Portable <input type="checkbox"/> Pole
	<input type="checkbox"/> Other, please specify: _____
	Quantity: _____ Size: _____ Height above ground: _____
Will the sign have electrical service: <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Estimated cost of construction:</b> _____	
<b>CONTRACTORS</b>	

- All contractors must have a current City of Bolivar Business License.
- Beginning April 22, 2010, all contractors renovating pre-1978 construction must be EPA Lead-Safe Certified.

**GENERAL**      Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Lead-Safe:  Yes  No  
 Address: \_\_\_\_\_ Licensed:  Yes  No License #: \_\_\_\_\_

**ELECTRICAL**      Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Lead-Safe:  Yes  No  
 Address: \_\_\_\_\_ Licensed:  Yes  No License #: \_\_\_\_\_

**PLUMBING**      Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Lead-Safe:  Yes  No  
 Address: \_\_\_\_\_ Licensed:  Yes  No License #: \_\_\_\_\_

**MECHANICAL**      Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Lead-Safe:  Yes  No  
 Address: \_\_\_\_\_ Licensed:  Yes  No License #: \_\_\_\_\_

**FENCE INSTALLER**      Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Lead-Safe:  Yes  No  
 Address: \_\_\_\_\_ Licensed:  Yes  No License #: \_\_\_\_\_

<b>OFFICE USE ONLY</b>			
Parcel Number: _____			
Subdivision: _____		Block: _____ Lot: _____	
Zoning District: _____		Flood Zone: _____ Required Parking: _____	
Lot: Inner Lot    Corner Lot		Type of Street: Arterial    Local    Collector	
Property Setbacks: Front: _____		Left Side: _____ Right Side: _____ Rear: _____	
Project Setbacks: Front: _____		Left Side: _____ Right Side: _____ Rear: _____	
Easements: _____			
Notes: _____			
Landscaping: Y N		Stormwater Detention: Y N      Plans & Specifications submitted: Y N	