

The City of Lake Lotawana
Building Permit Application Sign-off Sheet

***Permit Number:** _____

Property Owner's Name: _____

Contractor's Name: _____

Work Location: _____

Application Pick-up Date: _____

Application Drop-off Date: _____

And Time Received: _____

1) _____ **Date:** _____

Charles Evans
Building Official

Date Approved: _____

Date Denied: _____

Board of Adjustment Information if Required: _____

ADMINISTRATIVE PERMIT APPLICATION FORM

100 Lake Lotawana Road · Lake Lotawana, Missouri 64086 · Tel: (816) 578-4215 · Fax: (816) 578-4035 · www.lakelotawana.org

INSTRUCTIONS: This application and all required fees and information must be submitted in accordance with the Lake Lotawana Municipal Ordinance. All information requested in this application must be answered completely.

PART I: TO BE COMPLETED BY APPLICANT

APPLICATION INFORMATION

APPLICATION FOR (CHECK APPROPRIATE BOX):

- | | |
|--|--|
| <input type="checkbox"/> BUILDING PERMIT | <input type="checkbox"/> GRADING PERMIT |
| <input type="checkbox"/> DECK PATIO PERMIT | <input type="checkbox"/> HVAC PERMIT |
| <input type="checkbox"/> DEMOLITION PERMIT | <input type="checkbox"/> MECHANICAL PERMIT |
| <input type="checkbox"/> DRIVEWAY PERMIT | <input type="checkbox"/> PLUMBING PERMIT |
| <input type="checkbox"/> ELECTRIC PERMIT | <input type="checkbox"/> RETAINING WALL / SEAWALL PERMIT |
| <input type="checkbox"/> EXCAVATION PERMIT | <input type="checkbox"/> SEWER PERMIT |
| <input type="checkbox"/> FENCE PERMIT | <input type="checkbox"/> SEPTIC PERMIT |
| <input type="checkbox"/> SIGN/BILLBOARD PERMIT | |

FOR OFFICIAL USE ONLY

Appn. Number: _____

Date Received: _____

Received By: _____

BRIEF DESCRIPTION OF APPLICATION PURPOSE:

APPLICANT INFORMATION

APPLICANT/AGENT (If Not Property Owner):

Name: _____ Tel: (____) _____

Business Name: _____ Fax: (____) _____

Address: _____

City: _____ State: _____ Zip Code: _____

E-mail: _____

PROPERTY OWNER (If Different from Applicant/Agent):

Name: _____ Tel: (____) _____

Business Name: _____ Fax: (____) _____

Address: _____

City: _____ State: _____ Zip Code: _____

E-mail: _____

ENGINEER/ARCHITECT/SURVEYOR:

Name: _____ Tel: (____) _____

Business Name: _____ Fax: (____) _____

Address: _____

City: _____ State: _____ Zip Code: _____

GENERAL PROPERTY INFORMATION

PROPERTY ADDRESS OR GENERAL LOCATION (IN RELATION TO NEAREST STREETS):

PROPERTY TAX IDENTIFICATION NUMBER:

ZONING: Existing: _____ Proposed: _____

LAND USE: Existing: _____ Proposed: _____

GROSS SIZE OF PLAT/LOT:

Residential: _____ Commercial: _____ Industrial: _____ Other: _____ Total: _____

NUMBER OF LOTS:

Residential: _____ Commercial: _____ Industrial: _____ Other: _____ Total: _____

EXISTING PUBLIC FACILITIES:

	Public	Private	Other (Describe)
Water Service:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
Sanitary Sewer Service:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
Roadway Access:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____

FLOODPLAIN INFORMATION:

Floodway: Yes No If Yes, Section XXXXX applies.

Floodway Fringe: Yes No If Yes, Floodplain Development permit required pursuant to Section 430.07.

FIRM Map-Panel Number: _____ Zone: _____

Structure will be floodproof by: Elevation Design

ARE ANY OTHER PERMITS OR DEVELOPMENT APPROVALS REQUIRED, APPLIED FOR OR RECEIVED FOR THE APPLICATION PROPERTY BY THE CITY OR ANY OTHER JURISDICTION OR AGENCY?

Yes No If Yes, Describe Briefly and Attach a Copy of Each Permit, Approval or Application

PROPERTY IMPROVEMENT INFORMATION*

WORK DESCRIPTION: Summarize the work to be performed. Include names of all structures under this permit, i.e., attached garages, detached garages, accessory apartments, sheds, retaining walls, etc.

TYPE OF IMPROVEMENT: New Structure Addition Internal Alterations Damage Repair

LAND USE (LBCS Code): Primary Use _____ Secondary Use _____ Other _____

IMPROVEMENT CHARACTERISTICS:

Number of Buildings or Structures: _____

Number of Dwellings: _____

Building/Structure Depth: _____ ft.

Building/Structure Width: _____ ft.

Existing Floor Area: _____ sq. ft.

New Floor Area: _____ sq. ft.

Total Building Area: _____ sq. ft.

Roof/Overhang: _____ sq. ft.

Maximum Height of Buildings or Structures: _____ ft.

Total Impervious Area: _____

Stories Above Grade: _____

Stories Below Grade: _____

Total Number of Stories: _____

Basement:

Finished

Unfinished

None

Principal Type of Frame:

Masonry Wood Frame

Structural Steel

Reinforced Concrete

Other: _____

Fire Protection Features:

Sprinklers: Complete

Partial

None

Standpipes: Yes

No

Fire Alarm: Yes

No

Existing Electric Service: _____ Amps

Proposed Electric Service: _____ Amps

SETBACKS FROM PROPERTY LINE TO NEW STRUCTURE (in feet):

Front: _____

Left Side: _____

Right Side: _____

Side Street: _____

Rear: _____

PRECONSTRUCTION VALUE:

Primary Structure: _____

Accessory Structure: _____

ESTIMATED COSTS:

Construction: _____

Electric: _____

Mechanical/Heating-A/C: _____

Plumbing: _____

Other: _____

Total Cost: _____

CERTIFICATION*

I/we acknowledge receipt of the instruction sheet explaining the method of submitting this application. I/we realize that this application cannot be processed unless it is completely filled in; is accompanied by the documents requested by the Public Works Director; and is accompanied by the appropriate fee. I/we further certify that the foregoing information is true and correct to the best of our knowledge. I/we acknowledge that the Public Works Director shall have authority to impose such conditions as deemed necessary in order to serve the public interest and welfare.

Applicant Signature

Date

Property Owner Signature

Date

**This Application must bear the signature(s) of the property owner(s). If an authorized agent signs on the owner's behalf, the agent shall sign his own name and attach the owner's written notarized authorization to this Application.*

**CITY OF LAKE LOTAWANA
BUILDING INSPECTION CHECKLIST**

Residential Construction: Houses, Room additions, garages, and other residential types

Listed below are the MINIMUM inspection points (as applicable for the type of construction):

Site preparation including erosion control (including silt fencing)

Footing excavation and reinforcing

Foundation wall forming and reinforcing

Underground and under slab plumbing, sewer, septic, and sewer “WYE” connection

Underground and under slab electrical

Under slab and underground mechanical

Water inspection after all underground piping, meter yoke, pit and lid are in place

All concrete flat work reinforcing

Initial framing including connection to concrete walls and slabs

Framing rough-in (prior to insulating or drywall)

Electrical rough-in (including ground wire attachment prior to insulation or drywall)

Electrical service rough-in (for meter authorization prior to insulation or drywall)

Gas piping rough-in and pressure testing (for meter authorization prior to insulation or drywall)

Top rough plumbing including drain/waste, vents, and water piping (prior to insulating or drywall)

Fireplace (after firebox is built but before chimney is completed)

Insulation

Electrical Final

Mechanical/Plumbing Final

Storm Drainage

Final Occupancy Inspection (BEFORE OCCUPANCY PERMIT IS GRANTED)

NOTE: Other inspections may be required for your particular type of structure; it is YOUR responsibility to call us for an inspection consultation prior to proceeding with the work.

Note: Most projects require portable toilet facilities (This is YOUR responsibility!)

**CITY OF LAKE LOTAWANA
100 LAKE SHORE DRIVE
LAKE LOTAWANA, MO 64086
PH: 816-578-4215 FAX: 816-578-4035**

**BUILDING PERMIT PROCEDURES: NEW HOMES, AND ADDITIONS,
AND MAJOR REMODELS, OR RENOVATIONS**

* **Special Note:** If requested permit is for property within the Lake side residential zoning area, it is strongly recommended that the Lake Lotawana Association be notified prior to taking any formal permit action with the City.

*** Construction Work Hours are as follows:**

Monday thru Friday – 7:00 AM to 7:00 PM

Saturday and Sunday –8:00 AM to 6:00 PM

1. A Building permit Application may be obtained at the City Hall or downloaded from the Lotawana website.

2. Drawing instructions for New Homes, and major remodeling, renovations, and additions:

A) 2 sets of drawings must be submitted that include: current survey (not over 3 years old), proposed plot plan (showing the footprint of the structure), house plans or improvement plans (adequate to show the scope and details of the proposed construction).

B) Drawings must show dimensions to scale, be legible and MAXIMUM SIZE OF 22”X34”.

C) Drawings must show roof lines, decks, steps, porches, sidewalks, driveways, eaves and gutters, elevations (front, sides, and rear), location of City sewer lines (if applicable), and all setbacks from the property lines. All footing, foundation, concrete wall, slab on grade, and elevated slab plans must shown complete details including reinforcing and are required for submittal as applicable.

D) For New House or Addition the drawing must indicate the type of weather resistant envelope to be used on the exterior surface of the structure.

3. Approval process:

A) Submittals must be complete and include all of the above information.

B) Any missing information will delay the approval process until complete information (including any special project specific requested information) is received.

C) The submittal will be reviewed by the Zoning Administrator, Building Official, and City Engineer. This may take up to one (1) week depending on the project complexity and personnel availability and work load.

D) Once the permit is approved, it is the responsibility of the applicant to pay for, pick up, and post the permit. Permits must be posted so as to be visible from the road and be accessible to the City's inspectors.

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PERMIT DENIED APPEAL PROCESS

1) If any of the proposed work or submittals do not meet the requirements of the City Code, it is required that the applicant modify the submittal or furnish the additional information requested the Zoning Administrator to meet the Code requirements. Should the applicant disagree with the requested modification or submittals the applicant may file for an appeal to appear before the Board of Adjustment to seek a variance to the City Code. In such case please see paragraph 2 (below) for instructions. If no appeal is requested the permit application will be returned without further action.

2) A Board of Adjustment appeal application is attached. Please bring this to City Hall to initiate the appeal process. Allow two to three days to get the appeal process started. The completed appeal application, with attachments and the appeal fee (including the cost of certified letters to neighboring properties) must be returned to the City Hall thirty days before the Board of Adjustments meeting.

3) Appeal submittal information:

a) Twelve copies of all drawings are required: same as required for the original Building Permit application.

b) An applicant's letter stating reason(s) for the variance request including a statement of hardships justifying the variance.

c) A list (including complete mailing addresses) of all neighboring property owners within 500 feet of the appeal subject property.

4) Appeal applications properly submitted will be heard by the Board of Adjustment on a first come, first served basis, with all persons involved being notified of the time and date of the hearing.

5) Absolutely no Permit work can be performed and no Permit will be issued until a variance approval (with any approval conditions) from the Board of Adjustment is confirmed. A denial by the Board will negate the issuance of a Permit and the Permit application will be returned without further action.

**CITY OF LAKE LOTAWANA
BOARD OF ADJUSTMENT
NOTICE OF APPEAL**

OFFICE USE ONLY
Case # _____
Fee Paid _____
Check # _____
Scheduled Date To Be Heard _____

Name of Appellant: _____

Address of Appellant: _____

Location of Variance: _____

The Zoning Administrator of Lake Lotawana, on the ____ day of _____, 20____ rejected the application of the above. The Applicant is requesting a variance for _____.

Date _____

Zoning Administrator

The undersigned, whose name and address are set forth above, hereby appeals to the Board of Adjustment of the city of Lake Lotawana, Missouri, from the decision of the director of Zoning Administrator. The grounds of the appeal, including all the reasons why the undersigned has been aggrieved by said decision and all points of non-compliance on the part of said Administrator in making said decision are attached.

Dated this _____ day of _____, 2011

Appellant

Board of Adjustment Action:

Hearing Date: _____

Board Action By Vote:

_____ Variances Approved As

_____ Variance Disapproved

Concerns or Stipulations: _____

Signed: _____

BOARD CHAIRPERSON

Date _____