MISC	CELLANEOUS PERMIT APPLICAT	TON Date	e:
A PERMIT ISSUED SHALL BECOME INVALID IF THE AUTHORIZED WORK IS NOT COMMENCED WITHIN SIX (6) MONTHS AFTER ISSUANCE OF THE PERMIT.			
with the scope Official <b>This aj</b> additio	sion is hereby granted, subject to the permit holde e Building Code of the City of Cool Valley, to com and detail of this work, and subject to the notation . Permits are subject to revocation, or a stop work of oplication and review are for the City of Cool Vall onal covenants and restrictions which may be red IT THREE (3) SETS OF DRAWINGS	plete construction shown on the place indicated on the approved plan rder for cause at the discretion of the time of the second	plans submitted depicting the s or as listed by the Building he Building Official.
PROF	PERTY ADDRESS:		
OWNER NAME:		PHONE:	
EMAIL	ADDRESS:		
TYPE OF WORK:       RESIDENTIAL   CONSTRUCTION COST \$			
	RACTOR NAME:		
CONTRACTOR ADDRESS:			
	OUIS COUNTY LICENSE NO:		
X			
<u>X</u>	Applicant's Signature and Date		
	Inspections are required as checked below, call f (Do Not Writ	or inspections 72 hours in advanc te Below This Line)	e at 314-521-3500
	Please indicate how many inspec	tions are required on all cons	struction.
	INSPECTIONS:	PERMIT FEES:	
	Footings/Piers (before pouring)	Plan Review fee:	\$
	Foundation	Construction fee:	\$ <u></u>
	Framing (before plumbing & electric)	Inspection fee:	\$
	Miscellaneous	Penalty fee:	\$
	Final (when complete and ready for use/occupancy)		
		TOTAL PERMIT FEE	\$
Note			

APPROVED:

