**BUILDING PERMIT APPLICATION**

**A red and white logo

Description automatically generated**CITY OF GERALD

**RECEIVED ON: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EMAILED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PERMIT FEE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PERMIT #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PAYMENT: ☐ Cash ☐ Check #\_\_\_\_\_\_\_\_\_\_\_\_\_ ☐ Card DATE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DATE PUT IN SYSTEM:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ BY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ZONING: \_\_\_\_\_\_\_\_\_\_**

**REVIEW STAMP:**

**City Hall**

**106 E. Fitzgerald Ave.**

**P.O. Box 59**

**Gerald, MO 63037**

**573-764-3340**

**24-HOUR NOTICE REQUIRED FOR INSPECTION**

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| **APPLICANT INFORMATION** | | | | | | |
| Application for (Check Appropriate Box):  ☐ Plan Review (New Residential or Commercial)  ☐ Residential Electric (New)  ☐ Residential Electric (Upgrade)  ☐ Residential Mechanical  ☐ Residential Plumbing  ☐ Sign  ☐ Pool/Spa (Depth greater than 24 inches)  ☐ Utility Shed (Construction on site)  ☐ New Construction  ☐ Garage  ☐ Other (Describe):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | ☐ Commercial Electric (New)  ☐ Commercial Electric (Upgrade)  ☐ Commercial Single Panel Change  ☐ Retaining Walls (Over 5 feet)  ☐ Deck (Less than 32sq. feet)  ☐ Deck (More than 32sq. feet)  ☐ Ramp  ☐ Remodel  ☐ Basement Remodel  ☐ Mobile Home Set-Up  ☐ Mobile Home Improvement | | |
| Brief description of application purpose: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | |
| **PROPERTY INFORMATION** | | | | | | |
| Address: (*Cannot be P.O. Box)*  *Street:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ST:\_\_\_\_ ZIP:\_\_\_\_\_\_\_\_* | | | | | | |
| ZONING: | PROPOSED: | | | LAND USE: | | PROPOSED: |
| **APPLICANT INFORMATION** | | | | | | |
| Name: | | Phone: | | | Email: | |
| Home Address: (*Cannot be P.O. Box)*  *Street:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ST:\_\_\_\_ ZIP:\_\_\_\_\_\_\_\_* | | | | | | |
| Mailing Address: (*Can be P.O. Box)*  *Street:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ST:\_\_\_\_ ZIP:\_\_\_\_\_\_\_\_* | | | | | | |
| *NOTE: ALL CONTRACTORS MUST APPLY FOR A CONTRACTOR’S BUSINESS LICENCE WITH THE CITY OF GERALD BEFORE ANY WORK WILL BE ALOWED TO BEGIN. LIABILITY INSURANCE IS REQUIRED ALONG WITH A $30.00 FEE.* | | | | | | |
| **PROPERTY OWNER/CONSTRUCTION INFORMATION (IF DIFFERENT FROM ABOVE)** | | | | | | |
| Name: | | Phone: | | | Email: | |
| Home Address: (*Cannot be P.O. Box)*  *Street:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ST:\_\_\_\_ ZIP:\_\_\_\_\_\_\_\_* | | | | | | |
| Mailing Address: (*Can be P.O. Box)*  *Street:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ST:\_\_\_\_ ZIP:\_\_\_\_\_\_\_\_* | | | | | | |
| **ENGINEER/CONTRACTOR INFORMATION (CONTRACTOR MUST HAVE CONTRACTOR’S LICENSE WITH THE CITY OF GERALD)** | | | | | | |
| Business Name: | | Phone: | | | Email: | |
| Contact Name: | | Phone: | | | Email: | |
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| **PROPERTY IMPROVEMENT INFORMATION** | | | | | | |
| WORK DESCRIPTION (SUMMARIZE TH WORK TO BE PERFORMED):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | |
| SQ. FT OF PROPOSED STRUCTURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | PROPOSED DATE OF CONST. TO BEGIN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| TYPE OF IMPROVEMENT: New Structure Addition Internal Alterations Damage Repair | | | | | | |
| **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 BUILING AREA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_SQ. FT ROOF/OVERHANG: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_SQ. FT  MAXIMIM HEIGHT OF BUILDING/STRUCTURE: \_\_\_\_\_\_\_\_\_\_FT TOTAL IMPERVIOUS AREA:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  STORIES ABOVE GRADE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STORIES BELOW GRADE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  TOTAL NUMBER OF STORIES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ BASEMENT: FINSIHED UNFINISHED NONE  PRINCIPAL TYPE OF FRAME: MASONRY WOOD FRAM 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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ REAR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | |
| **PRECONSTRUCTION VALUE:**  PRIMARY STRUCTURES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ACCESSORY STRUCTURES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | |
| **ESTIMATED COSTS:**  CONSTRUCTION: \_\_\_\_\_\_\_\_\_\_\_\_\_ ELECTRIC: \_\_\_\_\_\_\_\_\_\_\_\_\_ PLUMBING: \_\_\_\_\_\_\_\_\_\_\_\_\_ MECHANICAL/HVAC:\_\_\_\_\_\_\_\_\_\_\_\_\_  OTHER (DESCRIBE): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TOTAL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | |
|  | | | | | | |
| **SIGNATURE** | | | | | | |
| APPLICANT agrees that all information required is filled out and correct. APPLICANT understands that if the application is not completed in full that the application may be rejected.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    Signature of Applicant Date  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    Print Name of Applicant | | | | | | |

**BUILDING PERMIT FEES FOR THE CITY OF GERALD**

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| **TYPE OF INSPECTION** | **FEE** |
| Retaining Walls (Over 5 feet) | $50.00 |
| Utility Shed (Constructed on site) | $30.00 |
| Residential Mechanical | $35.00 |
| Residential Plumbing | $35.00 |
| Residential Electrical – NEW | $50.00 |
| Residential Electrical – UPGRADE | $35.00 |
| Signs | $35.00 |
| Swimming Pools & Spas (Depth greater than 24”) | $45.00 |
| Decks (Less than 32 sq. ft) | $30.00 |
| Decks (Greater than 32 sq. ft) | $50.00 |
| Fences, roofing, siding, window installation, retaining walls |  |
| Ramps | $50.00 |
| Commercial Electrical – NEW | $75.00 |
| Commercial Electrical – UPGRADE | $75.00 |
| Commercial Simple Panel Change | $50.00 |
| Plan Review (New Residential or Commercial) | $35.00 |
| Suspended Concrete Floors (Required Sealed Design) | $50.00 |
| Mobile Home Improvement | $50.00 |
| Mobile Home Set-Up | $75.00 |

ALL FEES WILL BE DETERMINED ACCORDING TO SERVICE REQUIRED.

Residential and Commercial Permit Formula (NEW CONSTRUCTION)

\_\_\_\_\_\_\_\_\_\_ sq. ft x 75 x 0.003 = $ \_\_\_\_\_\_\_\_\_\_ fee

Minimum fee will be $30.00

Residential requires 2 sets of prints & plan review.

Commercial buildings require 2 sealed & signed sets of prints & plan review.

(sealed prints not required if project meets IBC 106.1 expectation)

Garage and Remodel Permit Formula

\_\_\_\_\_\_\_\_\_\_ sq. ft x 40 x 0.003 = $ \_\_\_\_\_\_\_\_\_\_ fee

Minimum fee will be $30.00

Requires 2 sets of prints & plan review.

Basement Permit Formula

\_\_\_\_\_\_\_\_\_\_ sq. ft x 20 x 0.003 = $ \_\_\_\_\_\_\_\_\_\_ fee

Minimum fee will be $30.00

Residential requires 2 sets of prints & plan review.