



Permit No. \_\_\_\_\_

**CITY OF PAOLA BUILDING PERMIT APPLICATION**  
Applications Will Not Be Processed Until All Requested Information Has Been Provided

**Job Address:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Owner Name:** \_\_\_\_\_

**Owner Phone #:** \_\_\_\_\_

**Type:** ☐ New ☐ Addition ☐ Remodel of Existing ☐ Tenant Finish ☐ Grading Only ☐ HVAC Only ☐ Electrical Only  
☐ Plumbing Only ☐ Footing/Foundation ☐ Fence ☐ Other \_\_\_\_\_

**Description:**

| <u>Contractor Type</u> | <u>Contractor Name</u> | <u>City of Paola License Number</u> | <u>Contact Phone #:</u> |
|------------------------|------------------------|-------------------------------------|-------------------------|
| General/Builder        |                        |                                     |                         |
| Mechanical             |                        |                                     |                         |
| Electrical             |                        |                                     |                         |
| Plumbing               |                        |                                     |                         |
| Foundation/Other       |                        |                                     |                         |

**Use** \_\_\_\_\_ ☐ Single Story ☐ Multi-Story Fire Sprinklers? ☐ Yes ☐ No

**Square Footage** 1<sup>st</sup> Floor \_\_\_\_\_ 2<sup>nd</sup> Floor \_\_\_\_\_ Basement \_\_\_\_\_ Other \_\_\_\_\_  
Garage \_\_\_\_\_ Decks/Covered Porch \_\_\_\_\_ **TOTAL SQ. FT.** \_\_\_\_\_

**Setbacks Provided** Street Yard \_\_\_\_\_ Side Yard \_\_\_\_\_ Side Yard \_\_\_\_\_ Rear Yard \_\_\_\_\_

**Utilities** ☐ City Water ☐ Rural Water ☐ City Sewer **Estimated Construction Value \$** \_\_\_\_\_

**STAFF USE ONLY**

**Zoning District** \_\_\_\_\_ **Setbacks Required** Street Yard \_\_\_\_\_ Side Yard \_\_\_\_\_ Side Yard \_\_\_\_\_ Rear Yard \_\_\_\_\_

**Sidewalk Required?** ☐ Yes ☐ No **Landscaping Escrow Required?** ☐ Yes ☐ No **Amount \$** \_\_\_\_\_

**Zoning Administrator Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**New Construction Application Requirements:**

☐ Plot Plan – 2 copies ☐ Residential Building Plans – 2 copies ☐ Commercial Building Plans – 2 copies  
☐ Right-of-way Permit ☐ Contractor Licenses Verified

I, the undersigned, hereby affirm that the above statements are true and correct and also agree to comply with all provisions of the building code and other applicable ordinances or laws.

\_\_\_\_\_  
*Applicant Signature*

\_\_\_\_\_  
*Date*

Permission for described work is granted by:

\_\_\_\_\_  
*Building Inspector Signature*

\_\_\_\_\_  
*Date*

THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT STARTED WITHIN 180 DAYS, OR IF WORK OR CONSTRUCTION IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER WORK IS STARTED, OR IF WORK OR CONSTRUCTION IS NOT INSPECTED BY THE BUILDING OFFICIAL WITHIN 180 DAYS. PERMITS SHALL BE RENEWED ANNUALLY.

PLEASE CALL (913) 259-3611 FOR INSPECTIONS  
QUESTIONS & APPLICATIONS TO [PERMITS@PAOLAGOV.ORG](mailto:PERMITS@PAOLAGOV.ORG)

| Fees             |  |
|------------------|--|
| Building         |  |
| Plumbing         |  |
| Mechanical       |  |
| Electrical       |  |
| Water            |  |
| Sewer            |  |
| Sewer Inspection |  |
| Plan Review      |  |
| Other            |  |
| <b>Total</b>     |  |