



**APPLICATION FOR  
BUILDING PERMIT**

**Village of Four Seasons  
133 Cherokee Road  
Four Seasons, MO 65049  
Phone: 573-365-3833**

Permit No: \_\_\_\_\_

SITE / PROPERTY INFORMATION			
App. Date:	Street Address:		
Type of Construction:			
Permit Fee:	Start Date:	Est. Construction Cost:	
HOMEOWNER(S) INFORMATION			
Name:		Address:	
City:	State:	Zip:	Phone #: ( )
Email Address:			
GENERAL CONTRACTOR INFORMATION			
Company Name:		Address:	
City:	State:	Zip:	Phone #: ( )
Point of Contact:			License #

STAGE	NAME OF SUBCONTRACTORS	LICENSE #
Footings / Piers		
Foundation		
Excavation		
Slab		
Carpentry		
Electrical		
Plumbing		
Utilities		
Mechanical		
Roofing		
Insulation		
Drywall		
Septic		
Pool / Spa		
Deck		
FINAL		

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her authorized agent to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official for the Code Official's authorized representative shall have the authority to enter areas covered by such permit at any responsible hour to enforce the provisions of the code(s) applicable to such permit. I also understand that I, along with all parties involved, are responsible for assuring that all necessary inspections are scheduled in accordance with the Building Code requirements of the Village of Four Seasons. Failure to meet these requirements may result in a stop work order and assessment penalty fees or fines as outlined in the regulations and ordinances of the Village of Four Seasons.

---

Signature of Applicant Address Phone# Date