



**DECK BUILDING PERMIT
APPLICATION
250 S. MAIN STRET, PECULIAR, MO 64078
(816) 779-5212**

Permit #: _____

Site Address _____ Legal Description (Lot, Block and Name of Subdivision) & Parcel ID# _____

Owner of Record _____ Mailing Address, City, State & Zip _____ Phone _____

General Contractor _____ Mailing Address, City, State & Zip _____ Phone _____

Email Address: _____

Zoning District: _____ Dwelling Type: _____

Setback(s): Side(s) _____ Rear _____ Total Value of labor & material \$ _____

Deck Design & Composition: _____

Applicant's Name: _____ Applicant's Phone #: _____

Applicant's Representative: _____
Name of Company or Employer _____ Phone _____

I hereby certify that I have read and examined this application and know the same to be true and correct. I hereby certify that I have been authorized by the property owner to act as his agent in applying for and obtaining this permit. All provisions of laws and ordinances governing this type of work shall be complied with, whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Subcontractors building or installing the deck are required to obtain a Business License from the City of Peculiar. No work shall be commenced prior to issuance of this permit.

SIGNATURE OF APPLICANT: _____ DATE: _____