

City of Mt. Vernon Application for Residential Building Permit
and Certificate of Occupancy
319 E. Dallas, Mt. Vernon, Mo. 65712
417-466-2167

Date: _____ Permit #: _____

Site Address: _____

Owner Name: _____ Phone #: _____

Address: _____

Activity: New structure:___ Addition:___ Remodel/Infill:___ Deck___
Demolition:___ Garage:___ Storage:___ Fence:___ Pool:___
Other: _____

Type: Full bsmt:___ Crawl space:___ Slab-on-grade___
1-story:___ 2-story:___

- Residential: 1-family:___ 2-family:___
 - Building contractor: _____ Ph.#: _____
 - Plumbing contractor: _____ Ph.#: _____
 - HVAC contractor: _____ Ph.#: _____
 - Elect. contractor: _____ Ph.#: _____
 - Legal description: Lot #:___ Block:___ Addition: _____
 - (If metes and bounds, may be an attachment).
 - Square footage of structure including attached garage: _____ sq. ft.
 - Cost of construction: \$ _____
 - Site Plan: (Show all present and planned structures, designate dimensions of lot, buildings, and set backs. Need not be to scale). Property Stakes must be visible.
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Points of entry for electric service, water, and sewer must be shown at the building.

Draw Site Plan Illustration Below:

In signing this application, I understand that if the information I have given is not correct or does not conform to the City of Mt. Vernon Zoning Ordinance # 2.56, my permit may be revoked by the zoning commission.

Signed: _____ (owner)

By: _____ (authorized agent)

Print name: _____

Date: _____

Fees:

-Building Permit fee: \$ _____

-Water service: \$ _____

-Sewer service: \$ _____

-Electrical service: \$ _____

-Total fees: \$ _____

Received and paid.

City clerk: _____

Building Officer: _____

“Notice: The disposal of demolition waste is regulated by the department of natural resources pursuant to chapter 260, RSMo. Such waste, in types and quantities established by the department, shall be taken to a demolition landfill or a sanitary landfill for disposal.”