



CITY OF  
**Oak Grove**

2110 S. Broadway · Oak Grove, Missouri 64075 · (816) 690-3773 · Fax (816) 690-8478

**PLUMBING PERMIT APPLICATION**

The City has adopted the  
2012 International Codes

Inspections call  
(816) 690-3773 Ext. 1007  
return application to:  
[buildingofficial@cityofOakgrove.com](mailto:buildingofficial@cityofOakgrove.com)

**FEE CALCULATED  
(Minimum \$25)**

Applied date \_\_\_\_\_

Permit Number \_\_\_\_\_

Project Address: \_\_\_\_\_

Lot: \_\_\_\_\_

Commercial: \_\_\_\_\_

Residential: \_\_\_\_\_

Multi-Family # of units \_\_\_\_\_

New Construction: \_\_\_\_\_

Remodel: \_\_\_\_\_

Tenant Finish: \_\_\_\_\_

Other \_\_\_\_\_

# of Traps: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

**PROPERTY OWNER**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email address: \_\_\_\_\_

**APPLICANT INFORMATION**

Applicant Name: \_\_\_\_\_ Company Name: \_\_\_\_\_

Owner: \_\_\_\_\_ Contractor: \_\_\_\_\_ Architect: \_\_\_\_\_ Engineer: \_\_\_\_\_ Other: \_\_\_\_\_

Company Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Business License #: \_\_\_\_\_

- Application for a permit and payment of proper fees must be made prior to commencement of work or the fee will be 3 times the amount of the permit fee.
- Permits are valid for 180 days.
- It shall be the duty of the person doing the work authorized by a permit to assure that all required inspections are scheduled and approved by the City Inspectors. Furthermore, it shall be the duty of the person requesting the inspection to provide access to and means for inspection of the work. The individual who signs this application assumes all responsibility and liability for all work performed as specified herein.

**SEE REVERSE SIDE OF PAGE.**

*"Come Grow With Us!"*

**Applicant Name Printed: x** \_\_\_\_\_

**Applicant Signature: x** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Building Official Printed: x** \_\_\_\_\_

**Building Official Signature: x** \_\_\_\_\_ **Date:** \_\_\_\_\_

**FEES**

|  |                                     |
|--|-------------------------------------|
| <b>Base Fee for up to 12 traps \$25.00</b> | <b>For each trap over 12 \$2.50</b> |
| <b>Hot Water Heater \$25.00</b>            | <b>Total Fee</b>                    |