



CITY OF  
**OAK GROVE**  
MISSOURI

2110 S Broadway, PO Box 805  
Oak Grove, Missouri 64075  
816.690.3773 • 816.690.8478

### DRIVEWAY PERMIT APPLICATION

The City has adopted the  
2012 International Codes

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

**FEE \$35**

Applied date \_\_\_\_\_ Permit Number \_\_\_\_\_

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

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

I am the: Homeowner \_\_\_\_\_ Contractor \_\_\_\_\_ Business License #: \_\_\_\_\_

Contractor Name (If not applicant) : \_\_\_\_\_

Address: (if not project address) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone  
Number: \_\_\_\_\_ Email address: \_\_\_\_\_

Width of Driveway: New: \_\_\_\_\_ Addition: \_\_\_\_\_ Existing: \_\_\_\_\_

Corner Lot: Yes: \_\_\_\_\_ No: \_\_\_\_\_ if yes, specify street names: \_\_\_\_\_

**It is the responsibility of the party applying for the permit to know where the property lines are located.**

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

Applicants Signature: x \_\_\_\_\_ Date: \_\_\_\_\_

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

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

**Supply drawing with measurements below, on back, or attach copy.**