

69051

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
9430 COURT HOUSE DRIVE
BELLEVILLE CITY, MO 63103
PERMITS (417) 313-2455 INSPECTIONS (417) 313-1810
AUTOMATED INFORMATION (417) 313-3800

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER

B00158106

Building Address 3023 AUBURN VIEW
BELLEVILLE CITY MO 63102
Suite/Apt. #: _____ SDPWP/Petition #: 67-30
Census Tract 63000 Subdivision HOMELAND
Section _____ Area _____ Lot 46
Tax Map 16 Parcel 53 Grid 16872
Zoning RC-DU Map Coordinates 11A2 Lot size _____

Property Owner's Name NVA INC / RYAN HUNTS
Address 6085 N. HARRISON ST.
City LEWISVILLE State MO Zip Code 64075
Home Phone _____ Work Phone 417-796-0980
Applicant's Name & Mailing Address, (if other than stated hereon):
Phone _____ Fax 417-796-7094

Existing Use VACANT LOT
Proposed Use SD
Estimated Construction Cost \$ 200,000
Description of Work DRIPAY - 1/2 FULL BSM + 200 SQ FT
1 1/2 STORY FULL BSM, 16x20, 3 BR, 2 BATH +
GARAGE (2 BR) GAR FP, 11x20 + 20x20
17x20

Contractor Company NVA INC / RYAN HUNTS
Contact Person Henry Johnson
Address 7601 CENTRAL BLVD. ST.
City LEWISVILLE State MO Zip Code 64012
License No. MO 1000036
Phone 417-796-0980 Fax 417-796-7094

Occupant or Tenant _____
Contact Name _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____

Engineer or Architect Company _____
Contact Person _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics
Height: _____
No. of stories: _____
Gross area, sq. ft. per floor: _____
Use group: _____
Construction type:
 Reinforced Concrete
 Structural Steel
 Masonry
 Wood Frame
 State Certified Modular

Utilities
Water Supply:
 Public
 Private
Sewage Disposal:
 Public
 Private
Electric Yes No
Gas Yes No
Heating System:
Electric Oil
Natural Gas
Propane Gas
Sprinkler system: N/A
 Full
 Partial
 Other Suppression
of Heads _____

Building Characteristics
SF Dwelling SF Townhouse
Depth _____ Width _____
1st floor: 65 _____
2nd floor: 25 _____
Basement: 15 _____
Finished Basement Unfinished Basement
Crawl space Slab on Grade
No. of Bedrooms 2
Height: 2.5
Multi-family dwellings:
No. of efficiency units: _____
No. of 1 BR units: _____
No. of 2 BR units: _____
No. of 3 BR units: _____
Other Structure: _____
Dimensions: _____
Footings: _____
Roof Height: 20'
 State Certified Modular
 Manufactured Home

Utilities
Water Supply:
 Public
 Private
Sewage Disposal:
 Public
 Private SEPTIC
Electric Yes No
Gas Yes No
Heating System:
Electric Oil
Natural Gas
Propane Gas
Sprinkler system: N/A
 NFPA #13D
 NFPA #13R
 Other:

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

[Signature]
Applicant's Signature
RYAN HUNTS
Title/Company

Henry Johnson
Print Name
2-18-06
Date

Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

** PLEASE WRITE NEATLY AND LEGIBLY. **

FOR OFFICE USE ONLY

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Land Development, DPZ			Front: _____	Filing fee: \$ _____
Plan Review			Rear: _____	Permit fee: \$ _____
Building Official			Side: _____	Excise tax: \$ _____
Dev. Engineering, DPZ			Side St: _____	Add'l per. fee: \$ _____
Health	<u>2-21-06</u>	<u>[Signature]</u>	All minimum setbacks met?	TOTAL FEES: \$ _____
Fire Protection			YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid: \$ _____
Is Government Council approval required prior to issuance?			YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due: \$ _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Is Entrance Permit required?	Check: \$ _____
ONE STOP SHOP: <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	Validation: \$ _____
Distribution of Copies: _____			Historic District?	Accepted by: _____
White: Building Official			YES <input type="checkbox"/> NO <input type="checkbox"/>	
Green: LDC, DPZ			Lot Coverage for New Town Zone	
Yellow: DED, DPZ			SDP/Permit fee approved date	
Pink: Health				
Gold: SHA				

BEDROOM RESTRICTION ACKNOWLEDGMENT
Hearthstone at Ellicott Meadows

The undersigned Purchaser has entered into a Purchase Agreement for the Property known as HB 46 and located in the Ellicott Meadows Community (the "Property").

By signing below, Purchaser acknowledges they have been informed of and understand the following information relating to the Property:

The Hearthstone at Ellicott Meadows is served by a community private sewage disposal system which can only accommodate a maximum of two bedrooms per Unit. Howard County will enforce this restriction and will not issue any building permits for modifications to any Unit where the number of bedrooms will be increased beyond two.

ACKNOWLEDGED BY PURCHASER:

Purchaser: *Jan McLeod*

Purchaser: *Keith McDonald*

Date: 1/19/06

RECEIVED
FEB 21 2006
HOWARD COUNTY HEALTH DEPT.
BUREAU OF ENVIRONMENTAL HEALTH