



6090 Woodson Street
 Mission, KS 66202
 Phone: (913) 676-8360
 Fax: (913) 722-1415

Permit # _____

Commercial Building Permit Application

Property Owner		Site Address	
Name		Address:	
Address			
City/ST/ZIP		Tenant:	
Telephone			
Email			
General Contractor			
Company		Licensee Name	
Contact		Email	
Address		License #	
City/ST/ZIP		License Class	
Phone:			
Fax:			
Sub-Contractors (Separate Forms Required for Each)			
Mechanical:		Roofing:	
License #	Class	License #	Class
Contact		Contact	
Phone		Phone	
Electrical:		Framing:	
License #	Class	License #	Class
Contact		Contact	
Phone		Phone	
Plumbing:		Other:	
License #	Class	License #	Class
Contact		Contact	
Phone		Phone	

