APPLICATION FOR CONSTRUCTION PERMIT CITY OF ARKANSAS CITY, KANSAS

Date:			ber: KS State Roofing #:		Permit Fee:		Plan Review Fee:		To	Total Fee:	
06/16/23	-										
TYPE OF PERMIT		BUILDING 🗆 0	CURB CUT	□ ELECTRICAL □	FENCE I	MECHANI	CAL PL	UMBING	☐ ROOFING	G □ SIGN	
JOB ADDRESS:	126 S	Summit						Z	one:		
Owner:				Address:			Phone:				
RCB Bank				P.O. Box 189 Cl	aremore, OK	74018	620-442-	4040			
Contractor: Electrician: HVAC: Plumber:											
					Waldorf R	iley Hea	ting and Co)			
Phone Number: 620-442-5610 USE OF BUILDING RESIDENTIAL □ COMMERCIAL ☑											
CLASS OF WORK	□ NEW □ ADDITION □ ALTERATION □ MOVE □ REMOVE □ REPAIR ☑ REPLACE										
Construction Type:	Occu	pancy Class: Oc	cupant Loa	d: Number of Stories:	Project Size:	Lot S	Size:	Floodplai YE	S &	oodplain Zone Elevation:	
WORK DESCRIPTION: Installation of a new Trane 4 ton all electric heat pump.											
SPECIAL CONDITIONS:											
IF A PERMIT IS APPLIED FOR, AND INSPECTION MUST BE SCHEDULE AT LEAST 24 HOURS IN ADVANCE TO SCHEDULE INSPECTIONS: 620-441-4420 VALUATION (INCLUDE ALL LABOR AND MATERIALS): \$10,500.00 NOTE: That the said building shall be demolished, constructed, remodeled, or repaired in accordance with all the requirements of the laws of the state of Kansas and the ordinances of the City of Arkansas City relative to fire regulations, subdivision regulations, zoning and all other regulations controlling such work, in a substantial and workmanlike manner and according to the recognized standard methods of construction employed for the type and class of building adopted for the building; that the City of Arkansas City shall be held harmless from any and all loss and expense or liability of any kind whatsoever which the city may suffer, including all costs incurred in the defense of any suit or action resulting from the issuance of this permit, or because of the demolition of the said building or construction, thereof, or by any reason of any act or thing done by virtue											
				of this	permit.	- ~ 55			g		
Before starting any excavation, Kansas One Call must be contacted at 1-800-344-7233. An Asbestos Inspection may be required. Contact the Kansas Department of Health and Environment, Asbestos Control Section, 1-785-296-1550 for information. If required, a copy of the Asbestos Inspection Report shall be submitted to the Building Official prior to any work being performed.											
Work may be stopped or permit canceled by building official for just cause.											
I hereby certify that I have read and examined this application and know the same to be true and correct.											
\underline{X} Kiley Christopher								(06 16 2	3	
(SIGNATURE OF CO	ONTRACT	OR OR AUTHORIZED	AGENT)						DATE		
(ICC PERMIT TECH	NICIAN S	IIGNATURE)							//_ DATE		