

CITY OF FAIRWAY  
5240 Belinder Road  
Fairway, KS 66205  
(913) 262-0350

**BUILDING PERMIT APPLICATION**  
Building Permits valid for 180 days - New Residential Construction Permit valid for 360 days  
RENEWAL OF PERMIT IS HALF THE ORIGINAL FEE

**APPLICATION TYPE:** \_\_\_\_\_ (i.e. Roof, Addition, Fence etc.)

2000 International Property Maintenance Code, 2012 International Fire Code, 2012 International Building Code, 2011 National Electrical Code, 2012 International Energy Conservation Code, 2012 International Residential Code, 2012 International Plumbing Code, 2012 International Mechanical Code, 2012 International Fuel Gas Code.

Note: Original application must be submitted. Photocopied signatures or Fax will not be accepted.

**Project Address** \_\_\_\_\_ **Date** \_\_\_\_\_

**Total Construction Value** (including all trades and labor) \$ \_\_\_\_\_

**Owner Name** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Email** \_\_\_\_\_

If different from project **Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**General Contractor** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Email** \_\_\_\_\_

**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**JoCo License No.** \_\_\_\_\_ \*Applicant must provide License Number

**Plumbing Contractor** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**JoCo License No.** \_\_\_\_\_ \*Applicant must provide License Number

**Electrical Contractor** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**JoCo License No.** \_\_\_\_\_ \*Applicant must provide License Number

**Description of work to be done:** \_\_\_\_\_

**Signature of Applicant** \_\_\_\_\_ **Date** \_\_\_/\_\_\_/\_\_\_

I hereby affirm that the statements made in the application are true and correct. All laws and ordinances governing this will be followed whether specified herein or not. I understand this permit does not grant authority to violate or cancel any state or local law.

**IN OFFICE USE**  
I received the Erosion Control Standards \_\_\_\_\_ (initial) and Article IV. Public Tree Protection \_\_\_\_\_ (initial) on \_\_\_/\_\_\_/\_\_\_.  
(Projects with excavation) (All projects) Staff \_\_\_\_\_ (initial)

**FOR OFFICE USE ONLY**  
**Approved by:** \_\_\_\_\_ **Issued by:** \_\_\_\_\_  
**Performance/Mud bond required?** \_\_\_ Yes \_\_\_ No **Permit Expires:** \_\_\_/\_\_\_/\_\_\_  
**TOTAL BUILDING PERMIT FEE:** \$ \_\_\_\_\_ **BUILDING PERMIT #** \_\_\_\_\_  
**RECEIPT #** \_\_\_\_\_ **DEPOSIT:** \$ \_\_\_\_\_  
**AMOUNT DUE:** \$ \_\_\_\_\_ **DATE PAID** \_\_\_/\_\_\_/\_\_\_ **EMAIL PUBLIC WORKS:** \_\_\_\_\_  
**PC OR BZA APPROVAL:** \_\_\_/\_\_\_/\_\_\_ **RECEIPT #** \_\_\_\_\_ **HOUSE DEMO EMAIL CHIEF:** \_\_\_\_\_

Mechanical (HVAC) Contractor \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
JoCo License No. \_\_\_\_\_ \*Applicant must provide License Number

Roof Contractor \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
JoCo License No. \_\_\_\_\_ \*Contractor must provide License Number/KS Registration #

Foundation Contractor \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Wood Framing or Other Contractor \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
JoCo License No. \_\_\_\_\_ \*Applicant must provide License Number

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**QUESTIONS TO BE COMPLETED FOR ALL PROJECTS: (circle yes or no)**

Will the project involve any new or current drainage lines (sump pumps, roof drains, etc.)? YES / NO  
IF YES MUST PROVIDE PLOT PLAN SHOWING LOCATION OF NEW DRAINAGE LINE DISCHARGE LOCATIONS TO MEET CODE.

Will the grade of the property be altered? YES / NO

Will any portion of this project take place within the City Right-of-Way? YES / NO

*The permit holder is responsible to ensure that mud, dirt, rock and other debris are not allowed to erode onto city streets and sidewalks, not tracked onto the streets by construction vehicles.*

**RIGHT-OF-WAY TREES – Fairway Code Chapter 11 Article IV. Public Tree Protection**

Removal of a Right-of-Way Tree requires authorization from the City and payment into the Fairway Tree Fund.

**Does the property have RIGHT-OF-WAY TREES? YES / NO**

NEW HOMES, ADDITIONS, REMODELS (ie: larger projects) require protective/temporary fencing (4' in height) to be installed and pass inspection by the Public Works Department BEFORE the building permit will be issued.

Visit City Hall or [www.fairwaykansas.org](http://www.fairwaykansas.org) to view the Public Tree Protection Ordinance fencing location requirements.

**Contact the Public Works Department at 913-722-2822 to schedule your ROW Tree Fencing inspection.**

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**CONTRACTOR DECLARATION**

I hereby affirm that my license is in full force and effect under the provisions of the Johnson County Contractor License Regulations and that all construction trades that are hired to work on the project will be properly licensed by Johnson County.

Signature of Contractor \_\_\_\_\_ Date \_\_\_/\_\_\_/\_\_\_ License Class \_\_\_\_\_ License No. \_\_\_\_\_

Print Name \_\_\_\_\_ E-mail \_\_\_\_\_

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**OWNER-BUILDER AS CONTRACTOR DECLARATION**

I, \_\_\_\_\_ as the **owner** and **will NOT be the occupant** of site address, \_\_\_\_\_ will exclusively contract with contractors that have an active license issued by the Johnson County Contractors License Board.

The owner of a Single Family Residence can do the work as owner occupied as long as the owner of the property is doing all of the work and the property is **not for sale or for rent**.

I, \_\_\_\_\_, as the **owner** and **will be the occupant** of site address \_\_\_\_\_ will be acting as my own General Contractor and/or doing my own installations or the following trades.

\_\_\_\_\_ General \_\_\_\_\_ Electrical \_\_\_\_\_ Mechanical \_\_\_\_\_ Plumbing \_\_\_\_\_ Foundation \_\_\_\_\_ Roof \_\_\_\_\_ Other \_\_\_\_\_

I am fully qualified to make these installations and understand that all City of Fairway inspections are required just as if I was a licensed contractor.

Signature of Owner \_\_\_\_\_ Date \_\_\_/\_\_\_/\_\_\_

Print Name \_\_\_\_\_ E-mail \_\_\_\_\_