



APPLICATION FOR BUILDING PERMIT COMMERCIAL ADDITIONS OR ALTERATIONS

City of Hannibal /Office of the Building Inspector
320 Broadway, Hannibal, Missouri 63401
Phone: (573) 221-0111 Fax: (573) 221-0646

Contractor:	Building Owner:
Address:	Address:
City, State, Zip:	City, State, Zip:
Phone:	Phone:
Contractor License number for the City of Hannibal: _____ If not licensed for City of Hannibal, must obtain one prior to start of construction	

BUILDING INFORMATION

Building Address:				
Property Zoning:	Flood Zone: <input type="checkbox"/> Yes <input type="checkbox"/> No	Lot Area:	Building Use:	Occupancy:

PERMIT TYPE:

Addition _____ Alteration _____ Remodeling _____ Roof Pitch change _____ Plumbing _____

TYPE OF WORK:

Square Foot added _____

Construction Cost (if remodeling, cost of materials and labor) _____

of added fixture or waste device (if new) _____

Description of work: _____

See attached sheet for required information before the application is approved.

I hereby acknowledge that I have read this application and state that the above is correct and I agree and comply with the City Ordinance and State Laws, regulating building construction. I understand that a Certificate of Occupancy must be issued before the building is occupied.

Signature of applicant _____ Date _____

Approved by _____ Date _____