City of Andover
1609 E Central Ave
PO Box 295
Andover, KS 67002

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CITY OF ANDOVER – DRAIN LAYER PERMIT APPLICATION

PROJECT ADDRESS_____

HOMEOWNER NAME & PHONE_____

CONTRACTOR NAME_____

BUSINESS ADDRESS_____

BUSINESS PHONE_____ **CELL PHONE**_____

E-MAIL_____

CLASS OF WORK: _____**New Structure** _____**Addition** _____**Existing Alteration**

_____**Residential** _____**Commercial/Industrial**

_____**Stand Alone Permit** _____**Subcontract under**_____

COMPLETE ALL ITEMS WHERE APPLICABLE

ITEMS	QUANTITY	UNIT FEE	SUBTOTAL
Waste Openings		$4.50	
Water Service New or Replacement		$5.00	
Mobile Home Water Service		$5.00	
Interior Rainwater Drain		$4.00	
Backflow Device		$5.00	
Miscellaneous – Subject to Building Official's Approval		$9.00	
Sewer – Building		$25.00	
Sewer – Tap City Main		$75.00	
Permit Issuance	1	$25.00	$25.00
TOTAL			

PERMIT APPROVAL REQUIRED BEFORE STARTING ANY WORK

I/we, the undersigned hereby certify and know that I/we have examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complies with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

The QUALIFIED PERSON must always sign.

_____ _____

(Print) Name of Contractor Signature of Contractor Date

_____ _____

(Print) Name of Owner Signature of Owner Date