



JOHNSON COUNTY COMMUNITY HEALTH SERVICES

Home Health • Public Health • Hospice
"Improving Your Quality of Life"

THIS IS NOT A PERMIT

NAME OF PROPERTY OWNER (AS INDICATED ON WARRANTY DEED)	* PARCEL NUMBER
ADDRESS OF CONSTRUCTION SITE (STREET, CITY, ZIP CODE)	* ¼ SEC., ¼ SEC., ¼ SEC., ¼ SEC., SECTION, TOWNSHIP, RANGE
	TELEPHONE NUMBER – HOME/CELL/WORK
MAILING ADDRESS (IF DIFFERENT FROM ABOVE)	

NON REFUNDABLE APPLICATION FEE \$200.00

*Parcel number and legal description (Section, Township, Range) required if an emergency address number has not been issued by the Johnson County Assessor's Office. This fee must be received before the permit to construct can be issued. Personal checks, cash and money orders will be accepted.

Do not send cash in mail, make check or money order payable to: **Johnson County**

MAIL TO: JOHNSON COUNTY COMMUNITY HEALTH SERVICES
723 PCA ROAD
WARRENSBURG, MO 64093

OFFICE USE ONLY	
DATE RECEIVED	
CHECK NUMBER OR CASH AMOUNT	
STAFF INITIALS	