

CITY OF SHAWNEE

CITY HALL
11110 JOHNSON DRIVE
SHAWNEE, KS 66203
(913) 631-2500
FAX (913) 631-7351

CIVIC CENTRE
13817 JOHNSON DRIVE
SHAWNEE, KS 66216
(913) 631-5200
FAX (913) 631-4651

FIRE
6501 QUIVIRA ROAD
SHAWNEE, KS 66216
(913) 631-1080
FAX (913) 631-1628

POLICE
5850 RENNER ROAD
SHAWNEE, KS 66217
(913) 631-2155
FAX (913) 631-6389

MUNICIPAL COURT
5860 RENNER ROAD
SHAWNEE, KS 66217
(913) 742-6003
FAX (913) 962-0983

VERIFICATION OF SUBCONTRACTOR'S WORK

Re: Project Address: _____ Bldg Permit # _____

I certify that the company listed below performed the [framing, electrical, mechanical, plumbing, fire protection (circle applicable type of work performed)] work for the project listed above.

Licensee Signature: _____ Date: _____

Print Name: _____

Company Name: _____

JO County Contractor License #, if available: _____

State of _____, County of _____

Subscribed and sworn to before me this _____ day of _____ 20_____

My appointment expires _____, 20_____.

Notary's Signature

Note to subcontractor: Complete this form and submit to the Shawnee Codes Administration office (11110 Johnson Drive, fax # 913-268-7562) upon project completion. Subcontractors may make copies of original notarized form and submit a copy for each project as long as original form is less than one year old.

REV. 09/10

