

CITY OF INDEPENDENCE

SUBMIT A LIST OF ALL SUBCONTRACTORS WHO WILL BE PERFORMING WORK ON THIS PROJECT

Address of Proposed Activity: _____

Subdivision Name: _____ Lot Number: _____

Property Identification Number (PIDN): _____

GENERAL CONTRACTOR: _____

Name of subdivisions where subcontractors are working

SUBCONTRACTOR: _____

ADDRESS: _____

PHONE: _____

SUBCONTRACTOR: _____

ADDRESS: _____

PHONE: _____

SUBCONTRACTOR: _____

ADDRESS: _____

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