VALLEY PARK FIRE & RESCUE

APPLICATION FOR CONSTRUCTION PERMIT

55 Crescent Ave. Valley Park, MO 63088 Voice: 636-225-4288 Fax: 636-225-5247

Date: ___/___/___ Address: _____
ADDRESS OF CONSTRUCTION LOCATION

Business Name / Subdivision: _____ Lot #: _____

Municipality: _____

Owner: _____
OWNER OF PROPERTY

Phone: ___-___-___ Fax: ___-___-___ E-Mail: _____
OPTIONAL

Address: _____
MAILING ADDRESS OF PROPERTY OWNER CITY STATE ZIP

Contractor: _____ Phone: ___-___-___

Address: _____
MAILING ADDRESS OF CONTRACTOR CITY STATE ZIP

Architect: _____ Phone: ___-___-___

Total Estimated Construction Cost: $ _____

Type of Work	Type of Occupancy	
☐ New Construction	☐ Residential	☐ Assembly
☐ Addition	☐ Single Family (1 or 2 unit)	☐ Business
☐ Alteration	☐ Single Family Attached (3+)	☐ Educational
☐ Repair	☐ Multifamily	☐ Factory
☐ Shell	☐ Hotel/Motel	☐ High Hazard
☐ Interior Finish	Units / Bldg _____	☐ Institutional
☐ Basement Finish	Units / Permit _____	☐ Mercantile
☐ Miscellaneous	☐ Utility / Miscellaneous	☐ Storage

☐ Custom Plan ☐ Master Plan Model or Plan: _____

Area: _____ SQUARE FEET Stories: _____

☐ Basement
- ☐ Finished
- ☐ Unfinished

☐ Smoke Detectors
- ☐ 110 Volt
- ☐ Automatic System

☐ Garage
- ☐ Attached
- ☐ Detached
- ☐ Under Living Space

☐ Sprinkler System
- ☐ Full System
- ☐ Limited Area
- ☐ None

I certify that I am the owner or agent authorized to apply for this permit and that all information herein is true and correct. I understand that occupancy is not granted until the final inspection is approved.

Signature: _____ Date: ___/___/___

Print Name: _____

Office Use Only

Construction Type: _____ Use Group: _____

Conditions/Notes: _____

_____

Plan Approved: _____ Date: _____ Permit Fee $ _____

Permit Issued By: _____ Date: _____ Number: _____ Entry Date: _____