



CREVE COEUR FIRE PROTECTION DISTRICT
ADMINISTRATIVE CENTER
11221 OLIVE BOULEVARD
CREVE COEUR, MISSOURI 63141
(PHONE: 314-432-5570 - FAX: 314-432-2367)

BUILDING
PERMIT
APPLICATION

Office Hours: Monday through Friday - 7:30 a.m. until 4:00 p.m.

<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> CLEAN AGENT	<input type="checkbox"/> GENERATOR	<input type="checkbox"/> TENT
<input type="checkbox"/> TENANT FINISH	<input type="checkbox"/> HOOD SUPPRESSION	<input type="checkbox"/> UNDERGROUND WATER MAIN	
<input type="checkbox"/> FIRE SPRINKLER	<input type="checkbox"/> SITE PLAN	<input type="checkbox"/> TEMPORARY STRUCTURE	
<input type="checkbox"/> FIRE ALARM	<input type="checkbox"/> ACCESS CONTROL SYSTEM	<input type="checkbox"/> UNDER/ABOVEGROUND FUEL TANK	

APPLICATION DATE _____

BUSINESS NAME OR JOB SITE _____ SUITE # _____

ADDRESS _____

SCOPE OF WORK _____

OWNER CONTACT PERSON _____ PHONE # _____

OWNER ADDRESS _____ FAX # _____

CITY, STATE, ZIP _____

CONTRACTOR CONTACT PERSON _____ PHONE # _____

CONTRACTOR ADDRESS _____ FAX # _____

CITY, STATE, ZIP _____

ARCHITECT NAME _____ PHONE # _____

ARCHITECT CONTACT PERSON _____ FAX # _____

ARCHITECT ADDRESS _____

CITY, STATE, ZIP _____

COST OF CONSTRUCTION _____

USE OF BUILDING _____ TRUSTEE APPROVAL YES NO

LOCATION CITY OF CREVE COEUR CITY OF TOWN & COUNTRY

CITY OF MARYLAND HEIGHTS UNINCORPORATED ST. LOUIS COUNTY

TYPE OF CONSTRUCTION	TYPE OF ROOF	TYPE OF FOUNDATION	TYPE OF HEATING	BASEMENT	SPRINKLERS
<input type="checkbox"/> BRICK	<input type="checkbox"/> COMPOSITION	<input type="checkbox"/> POURED CONCRETE	<input type="checkbox"/> ELECTRIC	<input type="checkbox"/> FULL	<input type="checkbox"/> FULLY
<input type="checkbox"/> FRAME	<input type="checkbox"/> SLATE	<input type="checkbox"/> CONCRETE BLOCK	<input type="checkbox"/> GAS	<input type="checkbox"/> PARTIAL	<input type="checkbox"/> PARTIAL
<input type="checkbox"/> BLOCK	<input type="checkbox"/> WOOD SHINGLES			<input type="checkbox"/> SLAB	<input type="checkbox"/> NONE

BUILDING HEIGHT _____ NUMBER OF STORIES _____ DATE STARTED _____

SUBDIVISION _____ SCHOOL DISTRICT _____ TOTAL FINISHED SQUARE FEET _____

RESPONSIBLE PARTY FOR PERMIT _____

ADDRESS OF PARTY PAYING FOR PERMIT _____

OFFICE USE ONLY

FEE \$ _____ PERMIT # _____ CONTROL # _____

DATE APPROVED _____ DATE ISSUED _____ DATE PICKED UP _____

APPROVED BY _____