



COTTLEVILLE FIRE PROTECTION DISTRICT

1385 Motherhead Road * Cottleville * MO * 63304
636-447-6655 Fax 636-441-1742 * www.cottlevillefpd.org

To set up inspection 636-447-6655 ext 2

APPLICATION FOR OCCUPANCY PERMIT

Please Type or Print

Application Date: _____ Inspection Date: _____

Business Name: _____

Type of Business: _____

Business Phone #: _____ Business Fax #: _____

Address: _____ Suite(s) #: _____

City: _____ Zip: _____

Business email: _____

Applicant: _____ **Signature:** _____

I understand that the building and occupancy will conform with the applicable requirements of the Cottleville Community Fire Protection District, Fire Prevention and Building Codes prior to issuance of a Certificate of Occupancy.

24 Hour Emergency Contact Information

Primary Name: _____

Phone # Home: _____ Cell: _____

Secondary Name: _____

Phone # Home: _____ Cell: _____

Business Owner

Business Owner Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Owner Phone #: _____ Owner Email: _____

Building Owner

Building Owner Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Owner Phone #: _____ Owner Email: _____

Leasing Agent

Leasing Agent Name: _____ Leasing Agent Phone #: _____

Leasing Agent Email: _____

For Office Use Only

Permit #OC _____ Permit Fee: \$70.00 Date Paid: _____ Check #: _____

Approval Date: _____ Approved By: _____ Use Group: _____

Parcel: _____ Square Feet: _____ Const. Type: _____

Occ. Load: _____ Sprinklered: Yes No Required: Yes No

Make checks payable to: Cottleville Fire Protection District

Station _____ Insp. Dist. _____ Shift _____ I.D.# _____