



Cottleville Fire Protection District

APPLICATION FOR SITE PLAN REVIEW

Review Fee: \$100

Includes one plan review and one revision. Extra review \$100.

Please Print Clearly

Project Name: _____

Project Address:

Number: _____ Street: _____

City: _____ Zip Code: _____

If an address has not been assigned for the property, one must be requested from St. Charles County Emergency Communications. They can be reached via email at: sceec_addressing@sccmo.org. The lack of an address assignment will not delay the initiation of the plan review process within our department, but an address will ultimately be needed.

What will be the function of the proposed project? _____

What type of construction is proposed?

Type IA _____ Type IB _____ Type IIA _____ Type IIB _____ Type IIIA _____ Type IIIB _____

Type IV _____ Type VA _____ Type VB _____

Will the building be provided with an automatic sprinkler system? Yes _____ No _____

If yes, which type? 13 _____ 13R _____

How many stories is the proposed project? _____

What is the total square footage of the project (per building)? _____

Will any fire hydrants be installed for this project? Yes _____ No _____

If any hydrants are installed, will they be public or private? _____

Design Professional:

Name: _____ Firm: _____

Address: _____

Email: _____ Phone: _____

Property Owner: _____

Property Owner Address:

Number: _____ Street: _____

City: _____ State: _____ Zip: _____

I hereby affirm that the proposed work is authorized by the property owner, and that I have been authorized to make this application as his/her authorized agent.

Applicant Signature: _____ Date: _____

Applicant Name (printed): _____

Applicant email: _____ Applicant Phone #: _____

Please email permit application to: fm@cottlevillefpd.org