



COTTLVILLE FIRE PROTECTION DISTRICT

1385 Motherhead Road
 Cottleville, MO 63304
 636-447-6655 Fax 636-441-1742

APPLICATION FOR PLAN EXAMINATION & BUILDING PERMIT

IMPORTANT – Applicant to complete all items in Sections I, II, III, & IV – PLEASE PRINT

SECTION I: LOCATION OF BUILDING

At (LOCATION) _____ Project Name _____
 (No.) (Street)

BETWEEN _____ AND _____
 (CROSS STREET) (CROSS STREET)

SUBDIVISION _____ LOT _____ BUILDING # _____

SECTION II. TYPE & COST OF BUILDING

<p>A. TYPE OF IMPROVEMENT</p> <p>1 <input type="checkbox"/> New building</p> <p>2 <input type="checkbox"/> Addition (If residential, enter number of new housing units added, if any, in Part D, 10)</p> <p>3 <input type="checkbox"/> Alteration, Interior Finish</p> <p>4 <input type="checkbox"/> Repair, replacement</p> <p>5 <input type="checkbox"/> Moving (relocation)</p> <p>6 <input type="checkbox"/> Fire Suppression System</p> <p>7 <input type="checkbox"/> Flam./Comb. Liquids Install</p> <p>8 <input type="checkbox"/> Private Fire Main</p> <p>9 <input type="checkbox"/> Fire Alarm/Detection System</p> <p>10 <input type="checkbox"/> Temp. Structures & Tents</p> <p>11 <input type="checkbox"/> Security Gates</p> <p>12 <input type="checkbox"/> Other _____</p>	<p>D. PROPOSED USE</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:50%;">Residential</th> <th style="width:50%;">Nonresidential</th> </tr> </thead> <tbody> <tr> <td>17 <input type="checkbox"/> Two or more family Enter # of Units: _____</td> <td>20 <input type="checkbox"/> Amusement, recreational</td> </tr> <tr> <td>18 <input type="checkbox"/> Hotel, motel, boardinghouse Enter # of Units: _____</td> <td>21 <input type="checkbox"/> Church, other religious</td> </tr> <tr> <td>19 <input type="checkbox"/> Other – Specify _____</td> <td>22 <input type="checkbox"/> Industrial</td> </tr> <tr> <td></td> <td>23 <input type="checkbox"/> Parking garage</td> </tr> <tr> <td></td> <td>24 <input type="checkbox"/> Service station, repair garage</td> </tr> <tr> <td></td> <td>25 <input type="checkbox"/> Hospital, institutional</td> </tr> <tr> <td></td> <td>26 <input type="checkbox"/> Office, bank, professional</td> </tr> <tr> <td></td> <td>27 <input type="checkbox"/> Storage uses</td> </tr> <tr> <td></td> <td>28 <input type="checkbox"/> School, other educational</td> </tr> <tr> <td></td> <td>29 <input type="checkbox"/> Stores, mercantile</td> </tr> <tr> <td></td> <td>30 <input type="checkbox"/> Tanks, towers</td> </tr> <tr> <td></td> <td>31 <input type="checkbox"/> Other – Specify: _____</td> </tr> </tbody> </table> <p>B. OWNERSHIP</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tbody> <tr> <td>13 <input type="checkbox"/></td> <td>Private (individual, corporation, nonprofit institution, etc.)</td> </tr> <tr> <td>14 <input type="checkbox"/></td> <td>Public (Federal, State, or Local government)</td> </tr> </tbody> </table>	Residential	Nonresidential	17 <input type="checkbox"/> Two or more family Enter # of Units: _____	20 <input type="checkbox"/> Amusement, recreational	18 <input type="checkbox"/> Hotel, motel, boardinghouse Enter # of Units: _____	21 <input type="checkbox"/> Church, other religious	19 <input type="checkbox"/> Other – Specify _____	22 <input type="checkbox"/> Industrial		23 <input type="checkbox"/> Parking garage		24 <input type="checkbox"/> Service station, repair garage		25 <input type="checkbox"/> Hospital, institutional		26 <input type="checkbox"/> Office, bank, professional		27 <input type="checkbox"/> Storage uses		28 <input type="checkbox"/> School, other educational		29 <input type="checkbox"/> Stores, mercantile		30 <input type="checkbox"/> Tanks, towers		31 <input type="checkbox"/> Other – Specify: _____	13 <input type="checkbox"/>	Private (individual, corporation, nonprofit institution, etc.)	14 <input type="checkbox"/>	Public (Federal, State, or Local government)
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<p>C. COST</p> <p>15 Cost of improvement _____ (\$) <i>To be installed but not included in the above cost.</i></p> <p>a. Electrical _____</p> <p>b. Plumbing _____</p> <p>c. Heating, air conditioning _____</p> <p>d. Other (elevator, etc.) _____</p> <p>16 TOTAL COST OF IMPROVEMENT \$ _____</p>	<p>(Omit cents)</p> <p>Nonresidential – Describe in detail proposed use of building, e.g., food processing plant, machine shop, laundry building at hospital, elementary school, secondary school, college, parochial school, parking garage for department store, rental office building, office building at industrial plant. If use of existing building is being changed, enter proposed use.</p> <p>_____</p> <p>_____</p>
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SECTION III. SELECTED CHARACTERISTICS OF BUILDING

<p>E. PRINCIPAL TYPE OF FRAME</p> <p>32 <input type="checkbox"/> Masonry (wall bearing)</p> <p>33 <input type="checkbox"/> Wood frame</p> <p>34 <input type="checkbox"/> Structural steel</p> <p>35 <input type="checkbox"/> Reinforced concrete</p> <p>36 <input type="checkbox"/> Other – Specify _____</p>	<p>F. PRINCIPAL TYPE OF HEATING FUEL</p> <p>37 <input type="checkbox"/> Gas</p> <p>38 <input type="checkbox"/> Oil</p> <p>39 <input type="checkbox"/> Electricity</p> <p>40 <input type="checkbox"/> Coal</p> <p>41 <input type="checkbox"/> Other – Specify _____</p>	<p>G. DIMENSIONS</p> <p>42 Number of Stories _____</p> <p>43 Total square feet of floor area, all floors, based on exterior dimensions _____</p>
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SECTION IV. IDENTIFICATION – To be completed by all applicants

Name	Address (Number, Street, City, & State)	Zip Code	Phone Number (with area code)
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1. Owner or Lessee

2. Contractor

Builder's License #:

3. Architect or Engineer

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of this jurisdiction.

Applicant Name (Type or print)	Address

Signature of Applicant

Date

Phone Number (with area code)

----- FOR OFFICE USE ONLY -----

SECTION V. VALIDATION

Building Permit Number: _____

Building Permit issued on: _____

Building Permit Fee: \$ _____

Plan Review Fee: \$ _____

Total Cost: \$ _____

FOR DEPARTMENTAL USE ONLY	
Use Group	_____
Construction Type	_____
Occupancy Load	_____

Approved by:

Title