## APPLICATION FOR BUILDING PERMIT



## **NOTE TO APPLICANTS:**

All permit applications MUST be accompanied by an Application for a Zoning Certificate. Failure to submit both applications will result in processing delays.

	Permit #			#
LOCATION	SITE ADDRESS			
<u>of</u> <u>Improvement</u>	SUBDIVISION			LOT NO
TYPE OF IMPROV	<u>'EMENT</u>			
NEW BUILDING		STORAGE BUILDING		_FIREPLACE
ADDITION	_	SWIMMING POOL		_DEMOLITION
ALTERATION		FENCE - HEIGHT:	TYPE:	
SIGN (*ADD	ITIONAL INFORMATION	I REQUIRED ON REVERSE SI	IDE)	
OTHER (PL	EASE SPECIFY)			
PROPOSED USE				
RESIDENT	IAL			
COMMERC	IAL - DESCRIBE PROPO	OSED LISE IN DETAIL:		
				-
ESTIMATED COS	T OF TOTAL IMPROV	EMENT: \$		
	NAME	ADDRESS INCLUDING CITY,	STATE, & ZIP CODE	TELEPHONE
WNER OR				
ONTRACTOR				
RCHITECT OR				
IGINEER				
CONTACT FOR THIS	S PERMIT:	СОМЕ	PANY:	
PHONE:_(_	)	E-MAIL ADDRESS:		
I/WE HEREBY CERT WORK AND I/WE AG	TIFY THAT I/WE, AS <u>THE</u> BREE TO CONFORM TO	OWNER OF RECORD, DESIR ALL APPLICABLE ORDINANO	RE TO UNDERTA CES OF THE CIT	KE THE PROPOSED Y OF BRIDGETON.
SIGNATURE OF OW	NER		DATE:	
OWNER'S NAME (PI	_EASE PRINT)			-
OAAIAEI (OIA) (IAIE (II				

ALL APPLICANTS **MUST SUBMIT FOUR (4) SITE PLANS OR PLOT PLANS** SHOWING EXISTING BUILDINGS AND SIGNS, IF APPLICABLE, AND **FOUR (4) SETS OF DRAWINGS AND/OR PLANS AND SPECIFICATIONS** DESCRIBING THE WORK TO BE PERFORMED.

## \*SIGN APPLICANTS - Complete the Following: Wall \_\_\_\_ Pole \_\_\_\_Roof 1) Type of Sign(s) proposed: \_\_\_\_Ground \_\_\_Other: (Please Specify) \_\_\_\_ Size of Sign(s): Square Feet 2) Lot Frontage: \_\_\_\_ Feet Building Frontage: Feet 3) Number, Sizes, and Types of Existing Signs on the Property: SIGN APPLICANTS MUST ALSO SUBMIT FOUR (4) SETS OF DRAWINGS THAT SHOW WHERE SIGNS EXIST AND ARE PROPOSED TO BE LOCATED ON THE PROPERTY, AND THAT SHOW WHAT THE PROPOSED SIGN WILL LOOK LIKE, INCLUDING ALL DIMENSIONS, SHAPE, MATERIALS, COLORS, AND STYLES OF LETTERING. -----FOR OFFICE USE ONLY-----PLEASE DO NOT WRITE BELOW THIS LINE Dwelling Units: \_\_\_\_\_\_Type: \_\_\_\_\_Use Group: \_\_\_\_\_Zoning District\_\_\_\_ Permit Fees: Building \$\_\_\_\_\_ Excavation \$\_\_\_\_\_ Extra Inspections \$\_\_\_\_\_ Sidewalk Escrow \$\_\_\_\_\_ Occupancy \$\_\_\_\_\_ Other Permit Fees \$\_\_\_\_\_ Total Permit Fee \$\_\_\_\_ Building Permit #\_\_\_\_\_ **Comments and Remarks:**

**Inspections:** 



## CITY OF BRIDGETON, MISSOURI APPLICATION FOR ZONING CERTIFICATE

APPLICANT (PLEASE P	RINT)	NO		
PHONE NUMBER				
	AND 00L.			
*****	*****	*********		
NATURE OF WORK	ERECT	NEW BUSINESS		
	ALTERATION	HOME OCCUPATION		
	OTHER			
I HEREBY CERTIFY THAT I H. BEST OF MY KNOWLEDGE.	AVE SUPPLIED AND I	PROVIDED THE INFORMATION ABOVE TO THE		
SIGNATURE OF APPLICANT		DATE		
PRINT NAME OF APPLICANT				
********	*****	**********		
OFFICE USE				
ST. LOUIS COUNTY TAX LOCATOR	NO			
DOES USE CONFORM TO PROVISIO				
YES NO ZONING I	DISTRICT			
IF NO, EXPLAIN				
IF APPLICABLE:				
PERFORMANCE STANDARDS	SAPPLY			
CERTIFICATE PROVIDED BY	ARCHITECT OR ENGINE	ER AS TO CONFORMANCE.		
APPROVED DENIED	_			
DATE				
		ZONING ADMINISTRATOR		