



HIGH RIDGE FIRE PROTECTION DISTRICT

2842 HIGH RIDGE BLVD. HIGH RIDGE, MO 63049

PHONE: 636-677-3371

APPLICATION FOR OCCUPANCY EXISTING RESIDENTIAL PROPERTY

DATE: _____ DATE INSPECTION REQUESTED: _____ RE-INSPECT DATE: _____

TYPE OF RESIDENCE:

Entered Google Entered FH

Single Family Modular Home Apartment Condo Mobile Home

Other - Explain: _____

Inspections will be conducted on Monday, Wednesday and Thursday. An inspection may be done the following day if request is received by/before 3:00 pm the day before and the schedule is not full. After initial inspection, all corrections need to be completed within thirty (30) days or this permit is void. No inspections will be done on weekends or holidays.

Property Address: _____ City: _____ Zip Code: _____

Name of Subdivision: _____ Lot # (if applicable): _____ Entry Code (If Applicable): _____

CONTACT INFORMATION:

Owner

Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____

Realtor

Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____

I understand if the information I have given is not true, my permit may be revoked by the Fire Marshal. I agree to comply with the adopting ordinance of the High Ridge Fire District. The owner or owner's agent is granting the Fire Code office the authority to enter areas covered by this permit to enforce code provisions related to the permit. I further understand that this structure may not be occupied by the buyer/renter until a certificate of occupancy has been issued. This original permit application will remain with the Fire Marshal and a copy will be given to applicant.

Signature of Applicant: _____

OFFICE USE ONLY

Permit #: _____ Received By: _____ Date: _____

Single Family: \$75.00 Mobile Home: \$35.00 Multi-Family: \$35.00 Condo: \$40.00

Inspection Fee Paid: Yes No Payment Type: Cash Credit Check# _____ RN: _____

Entered Google: Date/Name _____ Entered FH: Date/Name: _____

NOTES: _____