



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: _____

TYPE OF RESIDENCE:

- Single Family
 Modular Home
 Apartment
 Condo
 Mobile Home
 Other - Explain: _____

Inspections will be conducted on Monday, Wednesday and Thursday, between the hours of 9AM-12PM or 1PM-3PM. Inspections shall be scheduled according to availability of inspectors. If the inspection date requested is unavailable, then you will be scheduled for the next open inspection date. 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: _____ Date: _____

OFFICE USE ONLY

Permit #: _____ Received By : _____ Date: _____

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

Payment Type: Cash Credit Check# _____ Receipt Number: _____

Entered in Calendar Date/Name: _____

Entered in Firehouse Date/Name: _____

Entered in Ledger Date/Name: _____

Scheduled Inspection Date: _____ Inspection Date Changed (Request of Applicant): _____

Re-Inspection Date: _____

NOTES: _____