

Maryland Heights Fire Protection District

2600 Schuetz Road • Maryland Heights, Missouri 63043

Phone: (314) 298-4400 • Fax: (314) 298-8282

Permit Application

Date: _____

NOTE: Two sets of construction documents are required. One will be returned. _____

I, _____
Print

- Owner
 Contractor
 Agent

Signed

hereby make application to the Maryland Heights Fire Protection District for permit for the following project, located at: _____, Total Sq. Ft. of Project _____

Cost of Construction: \$ _____

Person to be contacted for pickup: _____ Phone: _____

Owner Name: _____

Street: _____ City: _____ State: _____ Zip: _____

Contact Numbers: Phone: _____ Pager: _____

Contractor Name: _____

Street: _____ City: _____ State: _____ Zip: _____

Contact Numbers: Phone: _____ Pager: _____

Tenant Name: _____

Contact Numbers: Phone: _____ Pager: _____

OFFICE USE ONLY

Plans Reviewed By: _____ Date: _____ Occupancy ID# _____

Comments: _____

Construction Type: _____ / Knox Box **Building Sprinkler**

Use Group: _____ / 704 Placard Full

Permit Number: _____ / Alarm System Partial

Permit Type: _____ N/A

Fee: \$ _____ Date Paid: _____ Check #: _____

Approved & Issued By: Fire Marshal: _____ Date: _____