



41 S. CENTRAL AVENUE
CLAYTON, MISSOURI 63105

APPLICATION FOR RE-OCCUPANCY PERMIT

BUILDING

ADDRESS _____ ZIP _____

FIRE DISTRICT _____ MUNICIPALITY _____

PROPOSED TENANT (Company Name) _____

PROPOSED TENANT (Individual Name) _____

PROPOSED USE _____ SQ/FT. TENANT SPACE _____

PRIOR USE _____ SQ/FT. BUILDING _____

BUILDING OWNER _____ OWNER PHONE # _____

BUILDING OWNER ADDRESS _____

NUMBER OF PARKING SPACES _____ IF PARKING LOT, PAVED _____ UNPAVED _____

SIGNS – A PERMIT MUST BE OBTAINED FOR ALL CHANGES AND NEW SIGNAGE.

The undersigned herewith applies for an occupancy permit for the above described premises under the terms of the St. Louis County Building Code. The permit fee must accompany this application. If the building is in a municipality, written approval must be obtained from that municipality prior to submitting application. (NOTE: Have the municipal official fill out and approve in Zoning Inspection portion). This application is not a permit and premises shall not be occupied until an inspection is made and all discrepancies (if any) are corrected. Application fee is not refundable.

APPLICANT'S SIGNATURE _____ TELEPHONE _____

I certify that I am the owner in fee or agent authorized to apply for this permit; that I am authorized to and do consent to entry onto the premises by St. Louis County employees for inspections of the premises.

APPLICANT'S ADDRESS _____ ZIP _____

EMAIL ADDRESS REQUIRED: _____

FOR OFFICE USE ONLY

ZONING INSPECTION: _____

ZONED _____ APPROVED _____ NOT APPROVED _____ DATE _____

COMMENTS: _____

ZONING SIGNATURE: _____

INSPECTON:

NUMBER OF OCCUPANTS _____ TYPE OF CONSTRUCTION _____ FLOORS _____

COMMENTS: _____

INSPECTOR ASSIGNED _____ INSPECTOR SIGNATURE _____

APPROVED: YES _____ NO _____ DATE _____ SUPERVISOR'S SIGNATURE _____