



# Building Permit Application

## City of Ferguson

### Public Works Department

OFFICE USE	
Permit Number	

<b>Project Address:</b>				<b>Date:</b>	
<b>Owner Name:</b>				<b>Estimated Cost:</b>	
<b>Applicant:</b>				<b>Fax:</b>	
<b>Email Address:</b>				<b>Phone:</b>	
<b>Type of Construction:</b>	<input type="checkbox"/> Residential <input type="checkbox"/> Commercial		<input type="checkbox"/> New <input type="checkbox"/> Remodel		
<b>Check Appropriate Boxes:</b>		<b>Separate Permit Required:</b>		<b>Describe work:</b>	
<input type="checkbox"/> Deck (140 sqft+) <input type="checkbox"/> Finish Basement <input type="checkbox"/> Garage <input type="checkbox"/> Pool <input type="checkbox"/> Room Addition <input type="checkbox"/> Shed (120 sqft+) <input type="checkbox"/> Driveway Apron		<input type="checkbox"/> Electrical <input type="checkbox"/> Mechanical <input type="checkbox"/> Plumbing <input type="checkbox"/> Other			
Length:	Width:	Height:	Total SQFT:		
<b>Contractor:</b>		<b>Address:</b>		<b>Phone:</b>	
<b>Electrician:</b>		<b>Address:</b>		<b>Phone:</b>	
<b>Plumber:</b>		<b>Address:</b>		<b>Phone:</b>	

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent, and we agree to conform to all applicable codes of this jurisdiction.

**Attach contract signed by owner and contractor.**

<b>Signature of Applicant:</b>		<b>Date:</b>	
<b>Print Name:</b>		<b>Cellular Phone:</b>	

#### OFFICE USE: REVIEW AND INSPECTION PROCEDURES

<b>Required Fire Inspections</b>	<b>Misc</b>	<b>Sprinkler</b>	<b>Building</b>
	<input type="checkbox"/> Hood Duct Weld <input type="checkbox"/> Hood Wet Dump <input type="checkbox"/> Elevator Interrace <input type="checkbox"/> Elevator Operation <input type="checkbox"/> Fire Alarm Final	<input type="checkbox"/> Underground Pressure <input type="checkbox"/> Aboveground Pressure <input type="checkbox"/> Piping Rough-in <input type="checkbox"/> Final Acceptance	<input type="checkbox"/> Stoppage/Framing <input type="checkbox"/> Drywall <input type="checkbox"/> Final <input type="checkbox"/> Other
<b>Plan Review Approved By</b>		<b>Date:</b>	<b>Fees:</b>
<b>Required Inspections</b>	<input type="checkbox"/> Footing <input type="checkbox"/> Piers/Anchor <input type="checkbox"/> Underground Electric <input type="checkbox"/> Ground Rough Plumbing	<input type="checkbox"/> Rough Plumbing <input type="checkbox"/> Rough Framing <input type="checkbox"/> Rough Electric <input type="checkbox"/> Rough Mechanical	<input type="checkbox"/> Final <input type="checkbox"/> Demolition <input type="checkbox"/> Drywall <input type="checkbox"/> Other
<b>Plan Review Approved By</b>		<b>Date:</b>	<b>Fees:</b>
<input type="checkbox"/> Requires STL County Licensed Electrician – License #			
<input type="checkbox"/> Requires STL County Licensed Plumber – License #			
<b>PERMIT EXPIRES SIX(6) MONTHS FROM DATE OF ISSUANCE</b>		<b>Date of Issuance:</b>	