

NORTHEAST AMBULANCE AND FIRE PROTECTION DISTRICT

FIRE MARSHAL'S OFFICE

7100 NATURAL BRIDGE RD, ST. LOUIS MO, 63121

PHONE: 314-382-1501 FAX: 314-382-7202

BUILDING PERMIT

DATE: _____ CONSTRUCTION COST: _____

NAME OF OWNER: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

I HEREBY REQUEST A PERMIT FROM THE NORTHEAST FIRE DISTRICT TO:

**BUILD: _____ REMODEL: _____ INSTALL: _____
AT**

CONSTRUCTION ADDRESS: _____

TYPE AND BUILDING USE: _____

TYPE OF CONSTRUCTION: _____

ROOF TYPE: _____ NUMBER OF STORIES: _____ BASEMENT: YES/NO

HEATING TYPE: _____

COPY OF BLUEPRINTS, OR SKETCH PLANS REQUIRED

CONTRACTOR/BUILDER NAME: _____

ADDRESS: _____

PHONE: _____

ARCHITECT NAME: _____

ADDRESS: _____

PHONE: _____

NAME OF APPLICANT: _____

**ALL OTHER PERMITS REQUIRED BY CITIES, TOWNSHIPS OR ST. LOUIS
COUNTY ARE THE SOLE RESPONSIBILITY OF THE APPLICANT.**

REMARKS: _____

PERMIT COST: _____ PERMIT NUMBER: _____

FIRE PREVENTION OFFICER

COPY OF PERMIT MUST BE POSTED AT CONSTRUCTION LOCATION