

# Wentzville Fire Protection District

209 W. Pearce Blvd., Wentzville, MO 63385  
Office: 636.332.9869 Fax: 636.639.1364



## Application for Building Permit

Submit applications and plans electronically by email: [wfpdpermits@gmail.com](mailto:wfpdpermits@gmail.com)

Date: \_\_\_\_\_

*Type or Print*

Project Address: \_\_\_\_\_

City & Zip code: \_\_\_\_\_

Business Name: \_\_\_\_\_

Area Sq. Ft. \_\_\_\_\_ Total Estimated Construction Cost: \_\_\_\_\_

Type of Construction	Commercial Occupancy Use	Residential Occupancy Use
<input type="checkbox"/> New Construction	<input type="checkbox"/> Assembly	<input type="checkbox"/> Multifamily (3 or more units)
<input type="checkbox"/> Addition	<input type="checkbox"/> Business	<input type="checkbox"/> Hotel / Motel
<input type="checkbox"/> Interior Finish/Alteration	<input type="checkbox"/> Educational	<input type="checkbox"/> Other _____
<input type="checkbox"/> Fire Repair	<input type="checkbox"/> Factory	Basement-unfinished sq.ft. _____
<input type="checkbox"/> Fire Sprinkler System	<input type="checkbox"/> Institutional	Basement-finished sq.ft. _____
<input type="checkbox"/> Fire Alarm System	<input type="checkbox"/> Mercantile	Garage sq.ft. _____
<input type="checkbox"/> Kitchen Hood System	<input type="checkbox"/> Storage	
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	

*Type or print*

### Builder / Contractor Information

*Type or print*

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Office phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Project contact person: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Person(s) to contact when building permit is completed:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### OFFICE USE ONLY

Plan approved: \_\_\_\_\_ Date: \_\_\_\_\_ Permit Fee: \_\_\_\_\_

Comments: \_\_\_\_\_