

**Wentzville Fire Protection District**  
502 Luetkenhaus Blvd., Wentzville, Missouri 63385  
636.327.6239 fax 636.639.1364  
[www.wentzvillefire.org](http://www.wentzvillefire.org)

**APPLICATION FOR OCCUPANCY PERMIT**

*Please TYPE or PRINT*

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

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Business Telephone Number: (        ) \_\_\_\_\_

Business Use: \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION**

Primary Contact Name: \_\_\_\_\_

Home: (        ) \_\_\_\_\_ Cell: (        ) \_\_\_\_\_

Secondary Contact Name: \_\_\_\_\_

Home: (        ) \_\_\_\_\_ Cell: (        ) \_\_\_\_\_

**BUILDING OWNER INFORMATION**

Owner Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

Telephone Number: (        ) \_\_\_\_\_

I do hereby make this application for an Occupancy Permit and agree to comply with all codes, ordinances and requirements of the Wentzville Fire Protection District. I understand that this Occupancy Permit may be revoked at any time for failure to comply with these requirements.

\_\_\_\_\_  
Applicant Name (print)

\_\_\_\_\_  
Applicant Name (signature)

**FOR OFFICE USE ONLY**

Fee paid (amount): \_\_\_\_\_ Date: \_\_\_\_\_ Permit Number: \_\_\_\_\_

Approval Date: \_\_\_\_\_ Approved By: \_\_\_\_\_

*Revised August 2005*

# FOR OFFICE USE ONLY

## NEW BUILDING INFORMATION

Existing building \_\_\_\_\_ New building \_\_\_\_\_

Specific Property Use: \_\_\_\_\_

*i.e. restaurant, office, clinic, warehouse, school, dept store, church.....*

Building Use Group: Assembly      Business      Factory      Institutional  
(circle one)

Mercantile      Storage      Misc: \_\_\_\_\_

Mixed Property Use: NO / Yes: \_\_\_\_\_

*(Row of stores, offices, residential, etc.....)*

Construction Type: \_\_\_\_\_

Roof Covering: \_\_\_\_\_

Detectors: NO / Yes \_\_\_\_\_

*List detector types (smoke, heat, water flow.....)*

Sprinkler System: NO / Yes \_\_\_\_\_ FDC location: \_\_\_\_\_

*List system type (wet, dry.....)*

Sprinkler Room location: \_\_\_\_\_

Building dimensions: \_\_\_\_\_ X \_\_\_\_\_ Key box location: \_\_\_\_\_

Utility locations: Electric service: \_\_\_\_\_ Gas service: \_\_\_\_\_

Occupancy load: \_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_