



CLAYTON FIRE DEPARTMENT BUREAU OF FIRE PREVENTION

10 NORTH BEMISTON AVENUE

CLAYTON, MISSOURI 63105

Phone: 314-290-8485

Fax: 314-721-9567

Email: fire@ci.clayton.mo.us



APPLICATION FOR FIRE SAFETY OPERATIONAL PERMIT

DATE: REASON FOR APPLICATION:

Applicant Information

Applicant's Name, Address, Phone, Owner/Contractor/Design Professional/Other checkboxes

Location of proposed construction

No., Street, Suite/Unit, Owner of property, Owner address

Type of Work to be Performed

Install, Repair, Remove, Alter, Abandon, Place out-of-service, Other checkboxes

Describe nature of work and specific location:

Estimated Date of Completion:

Total cost of project: \$

Table with 4 columns: ACTIVITY, FEE, ACTIVITY, FEE. Lists various activities like Carnivals & fairs, Compressed gasses, etc. with associated fees.

\* \$100.00 first \$2,000 of construction/project cost and \$2.00/\$1,000 or portion thereof after the first \$2,000. First inspection is included in permit fee.

I hereby certify the above information is correct and that I am the legal owner of the property or have been authorized by the owner to make application for the work described above.

PERMITS & FEES ARE NOT TRANSFERABLE AND ARE NOT REFUNDABLE.

Signature of Applicant: PRINT NAME:

PERMIT CARD AND APPROVED PLANS FROM FIRE DEPARTMENT MUST BE ON SITE OR INSPECTION REQUEST WILL BE REJECTED.