



PLANNING & DEVELOPMENT SERVICES DEPARTMENT
10 North Bemiston Avenue, Clayton, Missouri 63105
(314) 290-8452 • FAX (314) 863-0296

APPLICATION FOR BUILDING PERMIT RESIDENTIAL/COMMERCIAL

(PLEASE PRINT)

Permit# BU _____

You must submit three (3) sets of construction documents prepared by a registered design professional with this application. **A \$30.00 APPLICATION FEE MUST ACCOMPANY THIS APPLICATION.**

Applicants Name _____

Applicants Phone (_____) _____ Alternate Phone (_____) _____

() Owner () Contractor () Design Professional () Other _____

Location of Proposed Construction:

NO. _____ Street _____ Suite/Unit _____
(REQUIRED)

Is the property located in the flood plain? Y / N

Owner of Property _____

Address of Owner _____

Occupant _____

Application is made for:

() New () Addition () Alter () Repair () Demolition

Is the property residential or commercial: () Residential () Commercial

Type of construction (Circle One) IA IB IIA IIB IIIA IIIB IV VA VB

Use & Occupancy Group Classification as defined by the International Building Code _____

Describe nature of work and specific location on building or site _____

Realistic cost of construction including plumbing, mechanical and electrical work:

New construction including additions \$ _____

Alterations, decks, fences, and repairs, etc. \$ _____

TOTAL COST OF CONSTRUCTION \$ _____

Architect _____

Architect E-Mail Address _____

Engineer _____

Engineer E-Mail Address _____

Contractors Name _____

Contractors Address _____

City _____ State _____ Zip Code _____ Phone (_____) _____

Contractor E-Mail Address _____

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.

Signature _____ Date _____

Please Print Name _____