



OCCUPANCY PERMIT



**APPLICATION AND \$50 PERMIT FEE DUE
PRIOR TO SCHEDULING OCCUPANCY INSPECTION**

Check or Money Order Accepted-Payable to O'Fallon Fire Prot. District (Cash/Credit Card Not Accepted)

Date _____ Plaza Name _____

Street Address _____

In accordance with Section F105.3.3 of the O'Fallon Fire Protection District Ordinance No. 50

I _____ do hereby make application for an OCCUPANCY
Name and Title
PERMIT to occupy the building located at the above mentioned address to be known as

_____ Business Name

and to be used for _____
Type of Business

***BUILDING AND OCCUPANCY TO CONFORM WITH ALL APPLICABLE REQUIREMENTS OF
THE O'FALLON FIRE PROTECTION DISTRICT, FIRE PREVENTION CODES AND THE
INTERNATIONAL BUILDING CODE PRIOR TO ISSUANCE OF USE PERMIT***

THE FOLLOWING TELEPHONE NUMBERS MUST BE FURNISHED:

Business Phone Number _____

24-Hour Emergency Contact Telephone Numbers (Key Holders)

_____ First Contact Name & Title _____ Phone Number (Home or Cell) _____ Email _____

_____ Second Contact Name & Title _____ Phone Number (Home or Cell) _____ Email _____

Building Owner Information

_____ Building Owner's Name _____ Phone Number _____

_____ Street Address, City, State, Zip Code

Occupancy Approved _____

OFFICE USE ONLY

Occupancy Permit Number: _____

Occupancy Load _____

_____ Fire Marshal Signature

_____ Date

111 Laura K Drive, O'Fallon, Missouri 63366 • Office: 636.272.3493 • Fax: 636.272.6352

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