



HIGH RIDGE FIRE PROTECTION DISTRICT
 2842 HIGH RIDGE BLVD.
 HIGH RIDGE, MO 63049
 (636) 677-3371
COMMERCIAL OCCUPANCY APPLICATION

(PLEASE PRINT)

DATE: _____

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

CITY: _____ ZIP CODE: _____ PHONE: _____

TYPE OF BUSINESS: _____ BUILDING SQUARE FOOTAGE: _____

BUSINESS HOURS: _____

OWNER / MGR OF BUSINESS: _____

OWNER / MGR HOME ADDRESS: _____

OWNER / MGR HOME PHONE: _____

BUSINESS E-MAIL ADDRESS: _____

EMERGENCY CONTACTS

1ST ALTERNATE: _____ PHONE: _____

2ND ALTERNATE: _____ PHONE: _____

3RD ALTERNATE: _____ PHONE: _____

 I UNDERSTAND THAT THIS IS AN APPLICATION FOR OCCUPANCY AND THAT I WILL OBIDE BY ALL APPLICABLE CODES AND ORDINANCES OF THE HIGH RIDGE FIRE PROTECTION DISTRICT. I UNDERSTAND THAT OCCUPANCY WILL NOT BE GRANTED PRIOR TO AN INSPECTION OF THE ABOVE MENTIONED COMMERCIAL PROPERTY AND THAT ANY VIOLATIONS FOUND WILL BE CORRECTED PRIOR TO OCCUPANCY OF SAID BUILDING. I FURTHER UNDERSTAND THAT ANY NON-COMPLIANCE TO THE CODES AND ORDINANCES ADOPTED BY THE HIGH RIDGE FIRE PROTECTION DISTRICT WILL RESULT IN THE OCCUPANCY APPLICATION AND OCCUPANCY PERMIT TO BE REVOKED. UPON RECEPTION OF THE PERMIT AND APPLICATION FEE, THE HIGH RIDGE FIRE DISTRICT SHALL SCHEDULE AN INSPECTION FOR THE NEXT AVAILABLE DAY.

SIGNATURE OF APPLICANT: _____ DATE: _____

OFFICE USE ONLY

FEE: _____ RECEIVED BY: _____ DATE: _____ PERMIT # _____

CHECK#: _____ CASH: _____ CREDIT _____ BUILDING CLASSIFICATION: _____

APPROVED BY: _____ DATE APPROVED: _____

Entered in Calendar Date/Name: _____

Entered in Firehouse Date/Name: _____

Entered in Ledger Date/Name: _____

Notes:

