



UNION FIRE PROTECTION DISTRICT
 1401 West Springfield Ave. Union, MO 63084
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 636-583-2515 (F) 636-583-6433

APPLICATION FOR (IDENTICAL) BUILDING PERMIT

I (OWNER/AGENT) _____ DATE ____/____/____

OWNERS ADDRESS _____

CITY _____ STATE _____ ZIP _____

DO HEREBY MAKE APPLICATION TO THE UNION FIRE PROTECTION DISTRICT TO:

BUILD A _____

MULTI-FAMILY RESIDENTIAL BUILDING

ESTIMATED CONSTRUCTION COST

SUBDIVISION (IF APPLICABLE) _____ LOT NO. _____

BUSINESS NAME (IF APPLICABLE) _____

ADDRESS _____ CONSTRUCTION _____

NO / NAME _____ MODEL _____

CONTRACTOR _____ PHONE _____

ADDRESS _____ ZIP _____

TWO (2) SETS OF PLANS ARE TO BE SUBMITTED WITH THIS APPLICATION (ONE TO BE RETURNED MARKED APPROVED UPON RECEIPT OF PAYMENT OF PERMIT FEE) FINAL INSPECTIONS MUST BE MADE AND APPROVED BEFORE OCCUPANCY OR USE OF THIS STRUCTURE CAN BE PERMITTED. BUILDING PERMIT CARD MUST BE POSTED ON CONSTRUCTION SITE, OR INSPECTIONS WILL NOT BE MADE. UNION FIRE PROTECTION DISTRICT APPROVED PLANS MUST REMAIN ON BUILDING SITE AT ALL TIMES. ALL EXCEPTIONS OR ADDITIONS TO THE MASTER PLANS MUST BE INCLUDED.

OWNER/AGENT (PRINT) _____ SIGNATURE _____

FOR OFFICE USE ONLY

PERMIT NO. _____

DATE ISSUED ____/____/____

ISSUED BY _____

PERMIT FEE _____

DATE PAID ____/____/____

CHECK NO. _____

RECEIVED BY _____

REMARKS / SPECIAL CONDITIONS

