

EUREKA FIRE PROTECTION DISTRICT

PO BOX 97 ♦ 4849 HIGHWAY 109

EUREKA, MO 63025-0097

TELEPHONE: (636) 938-5505 ♦ FAX: (636) 938-6970

IN CASE OF EMERGENCY DIAL 9-1-1

USE PERMIT APPLICATION

(Please use Adobe Fill-In, Type or Print on Form)

Application Date: _____

I _____ do hereby make application for a **USE PERMIT** to
(Please Print Name of Applicant)
occupy a commercial occupancy in the Eureka Fire Protection District.

BUSINESS INFORMATION

BUSINESS NAME:							
BUSINESS STREET ADDRESS:					BUSINESS E-MAIL:		
BUSINESS MAILING ADDRESS:							
BUSINESS TELEPHONE #:	()		BUS. FAX #:	()			
BUSINESS TYPE:				HAZARDOUS MATERIALS:	YES		NO
(IF YES PLEASE LIST MATERIALS ON BACK OF SHEET)							

APPLICANT SIGNATURE:		DATE:	
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24 HOUR EMERGENCY CONTACT / KEY HOLDER INFORMATION

(This information will be kept **CONFIDENTIAL** and will only be used for emergency incident contact.)

CONTACT NAME / TITLE	HOME PHONE	CELL PHONE	OTHER
	()	()	()
	()	()	()
	()	()	()

BUILDING OWNER INFORMATION

BUILDING OWNER NAME:			
BUILDING OWNER ADDRESS:			
BLDG OWNER TELEPHONE #:	()	FAX #:	()

FOR OFFICIAL USE ONLY

PERMIT #		ISSUED BY:		DATE:	
FEE:	\$50.00	REV'D BY:		DATE:	
CHECK #:		CASH:		OCCUPANCY CLASSIFICATION:	
COMMENTS AND/OR SPECIAL CONDITIONS:					

NSF and Returned checks will be subject to a \$25.00 Charge.