



APPLICATION FOR ELECTRICAL, MECHANICAL OR PLUMBING PERMIT

City of Fredericktown
124 West Main Street
Fredericktown, MO 63645

PERMIT NO. _____

ADDRESS/LOCATION _____ ZONING _____

SUBDIVISION _____ LOT _____ BLOCK _____

APPLICANT NAME _____ PHONE _____

ADDRESS _____

OWNER(S) _____ PHONE _____

ADDRESS _____

CONTRACTOR _____ PHONE _____

ADDRESS _____ CITY LICENSE NO. _____

DESIGN PROFESSIONAL _____ PHONE _____

ADDRESS _____

TYPE OF PERMIT: ___ ELECTRICAL ___ MECHANICAL ___ PLUMBING

CONST. VALUE \$ _____ FEE \$30.00 _____

PROJECT DESCRIPTION _____

FOR WORK MINOR IN NATURE, AS DETERMINED BY THE BUILDING INSPECTOR, OR FOR WORK IN ONE OR TWO FAMILY DWELLINGS CONSTRUCTION DOCUMENTS ARE NOT REQUIRED TO BE PREPARED BY A DESIGN PROFESSIONAL OF THE STATE OF MISSOURI. SUBMIT TWO COPIES OF ALL REQUIRED PLANS.

SIGNATURE _____ DATE _____

APPROVED _____ DATE _____