

CITY OF LADUE, MISSOURI
APPLICATION FOR CERTIFICATE OF OCCUPANCY
FOR COMMERCIAL OR INDUSTRIAL PROPERTY

Permit No. _____ Date of Application _____ 20 ____

Name of Applicant _____
Address _____

Phone _____ Date of Birth _____
SS No. _____

Name of Company _____
Location of Property _____
Zoning of Property: Commercial _____ Industrial _____
Owner of Property _____
Owner's Address _____
Owner's Phone _____

1. Kind of Building: Office _____ Commercial _____ Industrial _____
Square footage occupied _____

2. Contemplated Reconstruction or Alteration of Building:

3. Complete Description of Business Operation: _____

4. Owner or Officers of Your Company:
Name _____ Title _____
Home Address _____
Phone _____
Date of Birth _____
Social Security No. _____

Name _____ Title _____

Home Address _____

Phone _____

Date of Birth _____

Social Security No. _____

Name _____ Title _____

Home Address _____

Phone _____

Date of Birth _____

Social Security No. _____

Name _____ Title _____

Home Address _____

Phone _____

Date of Birth _____

Social Security No. _____

5. Previous Business Address: _____

6. Length of Time Firm Has Been in Business _____

Applicant certifies that the building, structure, office or proposed use of the building, structure or office will comply with the building code, health laws and zoning ordinance regulation of the City of Ladue, and asks that a CERTIFICATE OF OCCUPANCY be issued to be effective as of _____, 20 ____.

Applicant's Signature

APPROVED:

Building Inspector

Fire Marshall