

# **TEMPORARY OCCUPANCY REQUEST CHECKLIST**

## **Complete These Forms**

- TEMPORARY OCCUPANCY REQUEST

## **Present These Documents**

- A comprehensive list of items that must still be completed including the following:
  - Location of item and date of anticipated completion
  - Signature of potential purchaser
  - Signature block for the Community Development Director's signature
  - Signature of Builder
  - A statement from the builder clearly indicating the intentions of the builder to complete the items on the list within the designated time frame
  
- A performance bond to secure that the items on the list will be completed by the builder to the reasonable satisfaction of the purchaser and the Director within the agreed upon time frame. The performance bond shall be in a form acceptable to the City of Fenton and the City and the purchaser must be the signatories for the release of the bond. See Chapter 430.020 of the City Code for details.

## **Pay These Fees** (due prior to processing)

- None

## **Note:**

No temporary occupancy permit may be issued if the portion of the work to be completed includes fixing Code Violations or such structural defects that would endanger safety and public welfare.

**CITY OF FENTON  
625 NEW SMIZER MILL ROAD  
FENTON, MO 63026  
636-349-8110 - FAX 636-343-5657**

**TEMPORARY OCCUPANCY REQUEST**

**A temporary occupancy permit will not be issued until an inspection has been performed by St. Louis County and the Fenton Fire Protection District. When both entities have notified the City of Fenton of approval, a temporary occupancy permit will be issued by the City of Fenton**

DATE: \_\_\_\_\_

*(Please Print)*

PROJECT ADDRESS: \_\_\_\_\_

ST. LOUIS COUNTY PERMIT NO. \_\_\_\_\_

TENANT NAME: \_\_\_\_\_

DESCRIPTION OF WORK: \_\_\_\_\_

BUILDING OWNER \_\_\_\_\_  
NAME AND ADDRESS:

\_\_\_\_\_

\_\_\_\_\_

BLDG. OWNER PHONE NO: \_\_\_\_\_

APPLICANT NAME \_\_\_\_\_  
AND ADDRESS:

\_\_\_\_\_

\_\_\_\_\_

PHONE NO.: \_\_\_\_\_

FAX NO.: \_\_\_\_\_

APPLICANT SIGNATURE: \_\_\_\_\_

ZONING SIGNATURE \_\_\_\_\_  
Community Development Director

Approved:  Not Approved:  Date: \_\_\_\_\_