

# **RESIDENTIAL OCCUPANCY - NEW RESIDENCE CHECKLIST**

## **Complete These Forms**

- Occupancy Permit Application, Residential – New Residence

## **Present These Documents**

- None

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

- \$25.00

## **Next Steps**

The home cannot be occupied until the attached Residential Occupancy Permit Application is completed and returned with \$25.00 to the City of Fenton and an Occupancy Permit is issued by the City of Fenton.

**Trash and Recycle receptacles will be delivered upon receipt of this Occupancy Permit application.**

**OCCUPANCY PERMIT APPLICATION**  
**RESIDENTIAL – NEW RESIDENCE**

**CITY OF FENTON**

**625 New Smizer Mill Road; Fenton, MO 63026-3597**  
**636-349-8110**

Office Use Only:                      Fee:     \$25.00

Date Paid: \_\_\_\_\_ Rec'd By: \_\_\_\_\_

*Please type or print*

Date of Application: \_\_\_\_\_

Proposed Resident: \_\_\_\_\_  
(Full Names with Middle Initials)

Proposed Address: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Owner of Building \_\_\_\_\_ Address: \_\_\_\_\_ Phone No. \_\_\_\_\_  
(If other than Resident)

Builder: \_\_\_\_\_ Address: \_\_\_\_\_ Phone No. \_\_\_\_\_

Subdivision: \_\_\_\_\_ Lot No. \_\_\_\_\_

Number of Occupants \_\_\_\_\_ Number of Vehicles \_\_\_\_\_ Req'd Parking Spaces by Ord. 2

Number of Floors \_\_\_\_\_ TOTAL SQUARE FEET \_\_\_\_\_ Intended Use of Premises: Residential

NOTE: Before the above described premises are occupied, and before any Occupancy Permits are issued, it is required that all appropriate inspections of such premises be conducted by appropriate governmental agents and agencies and said premises to be in compliance with all ordinances of the City of Fenton and all statutes of the State of Missouri.

Applicant has been notified that they must contact appropriate office for all necessary inspections.

I hereby certify that the above information is correct:

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Signature of Authorized Agent

Office Use Only:

**ZONING APPROVAL**

This is to certify that the above is approved for zoning:                      Zoning Classification: \_\_\_\_\_

\_\_\_\_\_  
Community Development Director                      Date

Permit \_\_\_\_\_ subject to corrections as noted:                      Add'l Inspection: \_\_\_\_\_

\_\_\_\_\_  
Remarks: \_\_\_\_\_

\_\_\_\_\_  
Remarks: \_\_\_\_\_

\_\_\_\_\_  
Remarks: \_\_\_\_\_

\_\_\_\_\_  
Remarks: \_\_\_\_\_