



**COMMERCIAL BUILDING PERMIT APPLICATION**

*Incomplete applications will not be processed.*

Project Address \_\_\_\_\_ Subdivision \_\_\_\_\_ Lot \_\_\_\_\_

Applicant is:  Architect/engineer  Contractor  Owner

**PROPERTY OWNER**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

**GENERAL CONTRACTOR**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ LSL Business License No. \_\_\_\_\_

**ARCHITECT/ENGINEER**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

**TYPE OF STRUCTURE**

Check only one.  Warehouse  Retail/Commercial  Office/Professional  
 Assembly  Educational  Factory  
 Institutional  Tower or Antenna  Hotel/Motel (No. of Units \_\_\_\_\_)

**CLASS OF WORK**

New Structure\*  Addition\*  Interior Remodel  Maintenance/Repair/Replace  Fire Repair  
 Tenant Finish  Exterior Changes\*  Retaining Wall\*

*\*Items require a site plan with modifications indicated on plan.*

**PROJECT DETAILS**

Check all items applicable to project.  Plumbing  Electrical  Mechanical/HVAC

Estimated completion date \_\_\_\_\_ Estimated Cost of Construction \$ \_\_\_\_\_

Description of work \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**BUILDING DATA**

Construction Type \_\_\_\_\_ Use Group \_\_\_\_\_ Stories \_\_\_\_\_ Area Sq. Ft. \_\_\_\_\_  
Width \_\_\_\_\_ Depth \_\_\_\_\_ Height \_\_\_\_\_ Flood Zone \_\_\_\_\_  
Setbacks: Front \_\_\_\_\_ Rear \_\_\_\_\_ Side 1 \_\_\_\_\_ Side 2 \_\_\_\_\_

**SUB CONTRACTORS**

Lake Saint Louis City Ordinance requires **any** General Contractor or Subcontractor(s), working on a project for which a permit is sought, obtain a LSL City Business License prior to issuance of any permit. The MEP contractors are also required to have a current contractor's license issued by St. Charles County.

**Name                      Address                      City/State/Zip                      Phone                      County License No.**

**Electrician** \_\_\_\_\_

**Mechanical** \_\_\_\_\_

**Plumber** \_\_\_\_\_

**ATTACH A LIST OF ALL ADDITIONAL SUBCONTRACTORS WHICH INCLUDES CONTACT NAME/COMPANY/ADDRESS/PHONE**

***SUBMITTING INCOMPLETE PLANS WILL DELAY THE RELEASE OF YOUR BUILDING PERMIT***

State Statutes require a Missouri architect's seal on all commercial designs. All structural, mechanical, electrical and plumbing plans shall bear the seal of a Missouri licensed engineer. Any portion of this property located within the flood plain requires a submission of a Flood Elevation Certificate.

- **New construction:** Submit the following documents along with this application: Two (2) complete sets (and one PDF) of sealed construction drawings including MEP drawings and two (2) complete sets of Civil Plans.

**Building any new structure or making changes to the exterior of an existing structure requires prior approval from the Planning & Zoning Commission and the Development Review Board.**

- **Tenant Finish:** Submit the following documents along with this application: Two (2) complete sets (and one PDF) of sealed construction drawings including MEP drawings.

**PLEASE READ AND SIGN**

I certify that I am the owner in fee or agent authorized to apply for this permit, that as such I grant permission to the Building Official or his representative to enter all areas of the above mentioned property for which I have hereby made application for a building permit, that I have contracted with the above named general, mechanical, electrical, and plumbing contractors regarding performing the work, and that the cost estimates herein are true and correct, to the best of my knowledge.

**APPLICANTS PRINTED NAME:** \_\_\_\_\_

**APPLICANT'S SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**PLEASE DO NOT WRITE BELOW THIS LINE**

Date Received: \_\_\_\_\_ Fire District: \_\_\_\_\_ Taxes Paid:  Yes  No

Review Fee: \_\_\_\_\_ Permit Fee: \_\_\_\_\_ Total Building Permit Fee: \_\_\_\_\_

DRB Approval Required:  Yes  No If Yes, Date of DRB Approval: \_\_\_\_\_

Permit Application Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_