



CITY OF FLORISSANT
DEPARTMENT OF PUBLIC WORKS

955 RUE ST FRANCOIS
 FLORISSANT, MO 63031
 (314) 839-7648 // publicworks@florissantmo.com

OCCUPANCY INSPECTION REQUEST

(Ref. Section 510.130)

<input type="checkbox"/> VACANT
<input type="checkbox"/> OCCUPIED
<input type="checkbox"/> SELLING
<input type="checkbox"/> RENTING

PROPERTY ADDRESS	
Street Number and Name	Zip Code

OWNER INFORMATION			
First and Last Name - Please Print	Date of Birth	Drivers License Number	DL State
Mailing Address - Street Name	City/ State	Zip Code	
Email Address	Primary Phone Number	Secondary Phone Number	

AUTHORIZED REPRESENTATIVE			
Agent Name - Please Print	Date of Birth		
Mailing Address - Street Name	City/ State	Zip Code	
Email Address	Primary Phone Number	Secondary Phone Number	

THIS INSPECTION IS VALID FOR 120 DAYS AFTER THE INITIAL INSPECTION DATE. WRITTEN REQUESTS FOR AN EXTENSION MUST BE APPROVED BY THE PUBLIC WORKS DEPARTMENT. AN EXTENSION DOES NOT GUARANTEE AN APPROVAL. UPON APPROVAL, A FEE OF \$50.00 IS DUE. A NEW INSPECTION IS REQUIRED IF OCCUPANCY IS NOT OBTAINED BY THE EXPIRATION DATE.

ALL UTILITIES MUST BE PROPERLY ACTIVATED AT THE TIME OF INSPECTION. ALL CODE VIOLATIONS FOUND DURING AN INSPECTION MUST BE CORRECTED, EVEN IF A CHANGE IN OCCUPANCY DOES NOT TAKE PLACE.

Authorized Representative has the authority to execute this Document on behalf of the Owner.

X _____ / _____
 Signature Date

FOR OFFICE USE ONLY

INSPECTIONS	INSPECTOR	DATE	STATUS
INITIAL INSPECTION		/ /	
RE-INSPECTION		/ /	
2 ND RE-INSPECTION		/ /	
3 RD RE-INSPECTION		/ /	

PERMITS REQUIRED	ELECTRICAL <input type="checkbox"/>	MECHANICAL <input type="checkbox"/>	PLUMBING <input type="checkbox"/>	BUILDING <input type="checkbox"/>	FIRE PROTECTION <input type="checkbox"/>	SEWER <input type="checkbox"/>
TOTAL # OF BEDROOMS		TOTAL # OF OCCUPANTS ALLOWED		OTHER: _____	<input type="checkbox"/>	

CLERICAL	FEE \$	RECEIPT #	RECEIPT DATE	INSP. DATE	TIME
INITIAL INSPECTION	\$	#	/ /	/ /	@
RE-INSPECTION	N/C	SAME AS ABOVE	SAME AS ABOVE	/ /	@
2 ND RE-INSPECTION	\$	#	/ /	/ /	@
3 RD RE-INSPECTION	\$	#	/ /	/ /	@
EXTENSION REQUEST	\$	#	/ /	AUTHORIZED BY:	

EXTENSION APPROVED FOR:					
WARD		LAST INSPECTION		RENTAL LICENSE REQUIRED	YES <input type="checkbox"/> NO <input type="checkbox"/>
PERMIT HISTORY:		CLERK:		EXPIRATION DATE:	