

City of Pevely

401 Main Street Pevely, Missouri 63070

APPLICATION FOR PLAN EXAMINATION AND BLASTING PERMIT

Location	LocationZoning					
of	Between	and				
		(Cross Street)		(Cross Street)		
Building	Subdivision		Lot	BLK Lot Size		
IDENTIFICATION						
OWNER						
Name:		Address:				
City:	State:	Zip Code:	Telephone Nur	mber:		
Email:						
BLASTER						
				- <u>-</u>		
			Telephone Nur	mber:		
Email:						
OTHER INFORMATION						
				Address:		
		Certif	fication/License Numb	per:		
	: AM/PM					
Do you intend to stock or store any explosives on location? Yes No						
If yes please provide the amount and type of explosives, blasting agents or blasting caps						
Type of construc	tion magazine or storage	re nlace:				
Type of construction magazine or storage place: Each blaster needs to provide current copy of license						
PRO	POSED USE	PROPOS	ED USE	COST		
RE	SIDENTIAL	COMMERCIAL	/INDUSTRIAL	Cost of Improvement: \$		
[] Single Family		[] Commercial		*Items to be installed, but not included in		
[] Duplex		[] Church		cost of improvement.		
[] Mulit-Family		[] Service Sta		*Other: \$		
#units_		[] Store/Reta				
[] Garage		[] Office/Ban		TOTAL COST: \$		
[] Carport		[] Professiona				
[] Other		[] Educationa	I			
		[] Other				
		[] Industrial (Type of B	susiness)			



City of Pevely

401 Main Street Pevely, Missouri 63070

SITE OR PLOT PLAN (NOTE PERMIT POSTING LOCATION ON DRAWING) (FOR APPLICANT USE)					
VALIDATION	PAYMENT BOX	Approved Pv			
Building Permit Number Building Permit Fee: \$	Amount Paid \$	Approved By:			
Total Permit Fee: \$	Payment type Check # Payment taken by	Date:			
	Date				