

Public Works

TRASH Info

Public Works

TRANS INTO

PERMIT NO.: _____

DATE: _____

City of Breckenridge Hills

9623 St. Charles Rock Road
St. Louis, Missouri 63114
(314) 427-6868

APPLICATION FOR BUILDING PERMIT

This application is hereby made to the Building Commissioner of the City of Breckenridge Hills

TYPE OF CONSTRUCTION: _____

ADDRESS OF CONSTRUCTION: _____

OWNERS NAME: _____ PHONE NO. _____

CONTRACTORS NAME: _____ PHONE NO. _____

CONTRACTORS ADDRESS: _____

_____ City State Zip Code

ESTIMATED COST OF THE ENTIRE JOB: _____

PURPOSED START DATE: _____

This application must be accompanied by two (2) sets of drawings and in most cases a site plan. If you have any questions please ask.

CHECKLIST FOR PERMIT SUBMITTAL

- Two copies of your site plan showing existing structures, and the proposed construction. Show distances from proposed construction to lot lines and accessory buildings.
- Two (2) complete sets of detailed construction drawings and specifications

APPLICANTS SIGNATURE

CITY OF BRECKENRIDGE HILLS
9623 ST. CHARLES ROCK ROAD
ST. LOUIS, MO. 63114
314-427-6868

APPLICATION FOR STORAGE UNIT PERMIT

DATE: _____

7 Day Permit: Expiration Date: _____

14 Day Permit: Expiration Date: _____

21 Day Permit: Expiration Date: _____

This application is hereby made to the Building Commissioner of the City of Breckenridge Hills

TYPE OF STORAGE UNIT:

P.O.D.S. _____ TRAILER _____ DUMPSTER _____ STORAGE UNIT _____

OWNERS NAME: _____ PHONE NO. _____

STREET ADDRESS OF STORAGE UNIT BEING PLACED:

LOCATION OF STORAGE UNIT OF PROPERTY:

CONTRACTOR'S NAME: _____ PHONE: _____

APPLICANT'S SIGNATURE

7 Day permit Fee: \$ 5.00
14 Day permit Fee: \$10.00
21 Day permit Fee: \$15.00

DATE _____

PERMIT NO. _____

City of Breckenridge Hills
DRIVEWAY PERMIT APPLICATION

OWNER: _____ PHONE NO. _____

ADDRESS: _____

INSTALLER: _____ PHONE NO. _____

ADDRESS: _____

Detailed Drawing of driveway

Asphalt

Concrete

Depth of base material _____

Depth of Asphalt or Concrete _____

Width _____

Length _____

Approximate Start Date _____

Estimated Cost of Driveway

\$ _____

PLEASE SUBMIT A SURVEY SHOWING THE PROPOSED LOCATION OF THE DRIVEWAY OR SHOW A DRAWING OF THE DRIVEWAY IN THE SPACE PROVIDED. IF YOU ARE UNSURE OF THE LOCATION OF THE PROPERTY LINES YOU WILL NEED TO OBTAIN A SURVEY.

Signature of applicant

DATE _____

PERMIT NO. _____

City of Breckenridge Hills

FENCE PERMIT APPLICATION

OWNER: _____ PHONE NO. _____

ADDRESS: _____

INSTALLER: _____ PHONE NO. _____

ADDRESS: _____

Detailed Drawing of fence

TYPE OF FENCE

- Chain Link
- Wood
- Other _____

Height _____

Length _____

Residential Commercial

Does fence serve as a pool enclosure?

YES NO

Estimated Cost of Fence \$ _____

Approximate Start Date _____

PLEASE SUBMIT A SURVEY SHOWING THE PROPOSED LOCATION OF THE FENCE OR SHOW A DRAWING OF THE FENCE IN THE SPACE PROVIDED. IF YOU ARE UNSURE OF THE LOCATION OF THE PROPERTY LINES YOU WILL NEED TO OBTAIN A SURVEY.

Signature of Applicant

City of Breckenridge Hills

(314) 427-6868

9623 St. Charles Rock Road

Breckenridge Hills, MO 63114-2637

Fax: (314)427-0139

Application Date: _____ Permit No: _____ Approval date: _____

Installation Address: _____

Contractors Name: _____

Address: _____ City: _____ State _____ Zip Code: _____

Phone #: _____ Fax #: _____

Contact Person: _____

Name of Business: _____

Address: _____ City: _____ State _____ Zip Code: _____

Phone #: _____ Fax #: _____

Contact Person: _____

Type of Sign

Cabinet Channel Letters Ground Monument Pole Sign Temporary Banner

Dimensions of Sign _____ (inches) width by _____ (inches) length

Height Above Grade: _____ (feet) Setback from Public Right of Way: _____

NOTE: Site plan and construction drawings must be included with this application

Single Faced Sign Double Faced Sign Illuminated: Yes No

Source of Illumination: _____

Type of illumination: Incandescent Fluorescent Other: _____

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make application as his authorized agent and we agree to conform to all applicable laws of the City of Breckenridge Hills.

Signature of applicant _____

Print Name: _____

Phone Number: _____

FOWL PERMIT APPLICATION

DATE _____

NAME OF OWNER _____

ADDRESS _____

PHONE NUMBER _____

TYPE OF FOWL _____

NUMBER OF FOWL _____

LOCATION OF COOP _____

BY APPLYING FOR THIS PERMIT, THE PROPERTY OWNER AUTHORIZES CITY OFFICIALS, AT ALL REASONABLE TIMES AND IN A REASONABLE MANNER, TO ENTER UPON AND INSPECT THE PROPERTY WITH RESPECT TO WHICH THE PERMIT IS APPLIED FOR TO DETERMINE WHETHER THE KEEPING OF DOMESTIC FOWL VIOLATES THIS SECTION AND ANY OTHER APPLICABLE ORDINANCES.

FEE: \$50.00 NUMBER OF FOWL X \$10.00 = _____

REINSPECTION; \$35.00

DATE INSPECTED _____ REINSPECTION: _____

PASSED; _____

SIGNATURE OF HOME OWNER

BUILDING INSPECTOR

City of Breckenridge Hills

9623 St. Charles Rock Road Breckenridge Hills, MO 63114-2637

(314) 427-6868

Fax: (314)427-0139

Wreck and Removal Permit

ADDRESS OF DEMOLITION			DATE
OWNERS NAME		ADDRESS	
CITY	STATE	ZIP CODE	PHONE NO
CONTRACTOR		ADDRESS	
CITY	STATE	ZIP CODE	PHONE NO.

Residential

Commercial

Type of Structure to be demolished

Ameren U.E.

Laclede Gas

Missouri American Water Co.

St. Louis County Waste Management

Department of Natural Resources

Other _____

Sewer capping Plumber License required

Estimated Cost of Demolition \$ _____

Start Date of Demolition _____

NOTES:

City of Breckenridge Hills

Above Ground Pool Permit Application

Required information for above ground pool permit request filed without detailed plans:

DATE OF APPLICATION PERMIT NUMBER

NAME _____

ADDRESS _____

CITY, STATE, ZIPCODE _____

TELEPHONE NUMBER _____

CONTRACTOR _____

Estimated Cost \$

LOCATION ON LOT: Distance from side property Line

Distance from rear property line

SIZE: Length Width Depth Diameter

FRAME TYPE: Metal (Metal frame must be grounded) Wood

GRADE: Essentially level. No grading needed. Needs Grading to level.
 Existing surface drainage of water will not be changed

BARRIER: Pool structure fenced with approved fence minimum 48" high on all sides with self-closing and self latching gate(s).

Yard or pool structure fenced with approved fence minimum 48" high with self-closing and self-latching gate(s). Doors in house wall protected (alarmed and self closing) or pool has approved power safety cover.

Pool walls (or walls with mounted guards) are a minimum of 48" high with access ladder area protected by an approved fence minimum 48" high with self-closing and self-latching gate.

WATER: Hose bib for filling protected by either a vacuum breaker or by an air gap between filling hose and pool.

Pool water draining will be by _____

ELECTRICAL: Existing electrical receptacle with ground fault protection.
 Electrical power will be installed by an electrical contractor.

SITE PLAN: A site plan (2 copies) with dimensions is presented with application.

INSTALLED BY: Owner Contractor

CITY OF BREDKENRIDGE HILLS

Excavation Permit Application

Permit Number _____

DATE _____

LOCATION OF WORK: _____

NAME OF CONTRACTOR: _____ Phone No. _____

ADDRESS OF CONTRACTOR: _____
CITY STATE ZIP CODE

OWNERS NAME: _____ PHONE NO. _____

ADDRESS STATE ZIP CODE

DISCRIPTION OF WORK: _____

LOCATION OF CUT Paved Surface Unpaved Surface

¼ of street

½ of street

¾ of street

Dimension of cut: _____ x _____

Square Feet: _____

\$3.00 per square foot \$25.00 minimum

Permit Fee \$3.00
Square Foot Charge \$ _____
Total Permit Cost \$ _____

City of Breckenridge Hills

Sewer Lateral Repair Application

(PLEASE PRINT)
APPLICANT:

Home Address:

City:

State:

Zip Code:

Phone No.:

DESCRIPTION OF PROPERTY:

Street Address or Location

Nature of Problem

Company televising sewer:

Phone No.:

Location of the break must be marked by the plumbing and/or sewer cleaning company

If a property owner is experiencing a problem with the lateral sewer service line, the property owner should contact a plumbing company or drain and sewer cleaning company to have the line cabled. Sometimes the problem is not with the sewer line, but it may have become clogged up from the entry of improper materials into the line. If cabling the sewer reveals a blockage then the sewer line will need to be video taped and a copy of that tape given to the city with this completed application. The cost of video taping and cleaning out the sewer line ***will not*** be a reimbursable cost item.

THIS APPLICATION MUST BE ACCOMPANIED BY A COPY OF THE PAID REAL ESTATE TAX BILL FOR THE PROPERTY

Property Owner Signature

Office use only

Bid No. 1

Company Name

Date of Bid

Amount of Bid

Bid No. 2

Company Name

Date of Bid

Amount of Bid

Bid No. 3

Company Name

Date of Bid

Amount of Bid

Contract awarded to:

Date:

APPLICATION FOR SPECIAL PERMIT

THE FOLLOWING EVENTS REQUIRE A SPECIAL PERMIT: Barbeques, carwashes, and any other type of fundraiser.

THIS APPLICATION MUST BE BROUGHT INTO CITY HALL. ALL APPLICATIONS MUST GO BEFORE THE CITY COUNCIL WHICH MEETS ON THE THIRD MONDAY OF EACH MONTH. FEE IS \$100.00.

TO: City of Breckenridge Hills
9623 St Charles Rock Road
St Louis, MO 63114

The undersigned hereby applies for a Special Permit under the Merchant's License Ordinance of the City of Breckenridge Hills, Missouri, for the following purpose.

For the period of _____ Thru _____ 20____

During the hours of _____

Location _____

Date Signature of Applicant Title

Home Address Zip Code Telephone Number

Name of Business Address of Business

Subscribed and Sworn to before me this _____ Day of _____ 20__

Notary Public

My Commission Expires: _____

Fee Paid _____ Date _____

License Number _____ Approved by: _____

Title: _____