Antonia Fire Protection District						
6633 Moss Hollow Road, Barnhart, MO 63012						
Phone: 636-948-4433 Fax: 636-948-0540						
Email: inspections@antoniafire.com						
	Applicati	on for Cha	ange of	Occupancy		
	Exist	ing Reside	ential Pr	operty		
Date:	Inspe Of	ction Date:		_ Re-inspection Office Use	Date:	
Type of Residence (see		GC GC	FH	Once Use	GC FH	
O Singl	e Family (\$100.00)	O Apartme	ent (\$50.00)	O Mobile Hom	e (\$50.00)	
	O Single Family Re	ntal (\$50.00)	O Other-	Explain:		
	and the schedule is not full.		tion, all correct	ions need to be complete	s day if request is received before ed within thirty (30) days or this	
Property Address:		(City:		Zip:	
Subdivision:		Lot # (if ap	plicable):	Entry Code	(if applicable):	
	<u>Buy</u>	er/Renter Inform	nation (if av	<u>ailable)</u>		
Name:	Name: Email:					
	Phor	ne:				
	<u> </u>	Applicant/Respon	nsible Individ	dual		
O Buyer	O Seller	0 1	Realtor	O Landlord	O Renter	
Name:		· · · · · · · · · · · · · · · · · · ·	Email:			
	Phor	ne:				
ordinance of the Fire Dist enforce code provisions re	trict. The owner or owner's lated to the permit. I furthe	agent Is granting the standard stand Standard standard stan	he Fire Code of is structure ma	ffice the authority to ent y not be occupied by the	ee to comply with the adopting er areas covered by this permit to buyer/renter until a certificate of will be given to the applicant.	
	Signatur	e:		·····		
		For Office	Use Only			
Permit #	·····	Received by: _		Date:		
Fee Paid:	Yes Ty	pe of Payment:	O Card	O Cash O C	Check #	
Notes:						