

**NORTHEAST AMBULANCE AND FIRE PROTECTION DISTRICT  
FIRE MARSHAL'S OFFICE**

7302 PASADENA BLVD, ST. LOUIS MO, 63121  
PHONE: 314-382-1501 FAX: 314-382-7202

**DEMOLITION PERMIT**

DATE: \_\_\_\_\_ DEMOLITION COST: \_\_\_\_\_ PERMIT COST: \_\_\_\_\_

PERMIT NUMBER: \_\_\_\_\_

NAME OF OWNER: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE: \_\_\_\_\_

**I HEREBY REQUEST A PERMIT FROM THE NORTHEAST FIRE DISTRICT TO:**

**DEMOLISH: \_\_\_\_\_ REMOVE: \_\_\_\_\_ OTHER: \_\_\_\_\_**  
**AT**

**ADDRESS: \_\_\_\_\_**

**ROOF TYPE: \_\_\_\_\_ NUMBER OF STORIES: \_\_\_\_\_ BASEMENT: YES/NO**

**A COPY OF AUTHORIZATION FROM ALL UTILITIES AND ACKNOWLEDGEMENT  
OF OWNER'S OR AGENT'S SIGNATURE (VERIFIED BY NOTARY PUBLIC) OF  
THE PROPERTY, DESIRED BUILDING OR STRUCTURE TO BE DEMOLISHED  
AND OR REMOVED MUST BE SUBMITTED.**

**DEMOLITION COMPANY NAME: \_\_\_\_\_**  
**ADDRESS: \_\_\_\_\_**  
**PHONE: \_\_\_\_\_**

**NAME OF APPLICANT: \_\_\_\_\_**

**THE NORTHEAST AMBULANCE AND FIRE PROTECTION DISTRICT OF ST. LOUIS  
COUNTY, MISSOURI COMPLIES WITH ORDINANCE NUMBER 92, SECTION  
3303 OF THE INTERNATIONAL BUILDING CODE (2009 EDITION). UPON  
COMPLETION FIRE MARSHAL OFFICE MUST BE CONTACTED FOR FINAL  
INSPECTION.**

**REMARKS: \_\_\_\_\_**

\_\_\_\_\_  
FIRE PREVENTION OFFICER

**COPY OF PERMIT MUST BE POSTED AT DEMOLITION LOCATION**