

CITY OF PAGEDALE
1420 FERGUSON AVE.
PAGEDALE, MO. 63133
314-726-1200

APPLICATION FOR EXCAVATION PERMIT

NAME OF BUSINESS: _____

ADDRESS: _____ CITY, STATE, & ZIP: _____

PHONE NUMBER: _____

WE HEREBY MAKE APPLICATION FOR PERMIT TO EXCAVATE IN

FOR THE PURPOSE OF _____

***YOU MUST CALL CITY HALL FOR BASE
INSPECTION BEFORE CONCRETE IS POURED***

PLEASE ISSUE PERMIT FOR ABOVE

CITY OF PAGEDALE

BY _____

PERMIT GRANTED:

PERMIT NO. _____ DATE _____