



THE CITY OF PAGEDALE

1420 FERGUSON AVE.
PAGEDALE, MISSOURI 63133

314 726-1200 office
314 726-2604 fax

APPLICATION FOR RESIDENTIAL OCCUPANCY PERMIT

APPLICATION PERMIT # _____

I hereby request permission to occupy _____
(Address)

In the City of Pagedale, Missouri, as a single dwelling unit.

NAMES & AGES OF APPLICANTS AND ALL OTHERS WHO WILL OCCUPY DWELLING

NAME	AGE	D.O.B.	RELATIONSHIP
			SELF

Signature of Applicant: _____

Date: _____

State of Missouri

County of St. Louis

Social Security # _____ - _____ - _____

Phone # () _____ - _____

NOTE: THIS IS NOT AN OCCUPANCY PERMIT! DO NOT OCCUPY PREMISES UNTIL PERMIT IS ISSUED!

An application fee of \$15.00 must accompany this application.

NOTE: Pagedale Ordinance prohibits moving in or out of a residence between the hours of sunset (dusk) and sunrise (dawn).

PLEASE HELP KEEP OUR CITY CLEAN

Waste Management Acct# _____

Total Number of occupants who will occupy the residence _____

Total number of bedrooms in the residence _____

Owner or Agent: _____ Phone #: _____

Owner's Address: _____

Applicant's place of employment: _____

Phone # () _____ - _____

Spouse's place of employment: _____

Phone # () _____ - _____

Previous Address: _____

DO YOU OWN A DOG(S)? YES: _____ NO: _____ CITY STATE ZIP HOW MANY: _____

IT IS THE LAW! NO PIT BULLS OR MIXED WITH PIT BULL OF ANY NATURE IS ALLOWED IN THE CITY OF PAGEDALE.

BREED	COLOR	SEX	DOG'S NAME

HAS YOUR DOG RECEIVED ITS RABIES SHOTS? YES: _____ NO: _____

IF SO, FURNISH DATE: MONTH: _____ DAY: _____ YEAR: _____

DOCTOR'S NAME: _____

DOCTOR'S ADDRESS _____

CITY STATE ZIP OWNERS OF ALL DOGS MUST HAVE LIABILITY INSURANCE.

I do not own a dog at this time. I hereby understand and agree that at any time while residing in the City of Pagedale, if I do decide to own a dog or cat, I will abide by the City of Pagedale's Ordinance Numbers 236, 541, and 821 (Regulation of dogs and cats). I further understand that in failing to comply with these particular Ordinances, I will be issued a notice to appear in Pagedale's Municipal Court.

Applicant's Signature: _____ Date: _____

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