



5490 Fifth Street, Cottleville, MO 63304

**Department of Community Development**

Phone: (636) 498-6565 Fax: (636) 498-6575

**CONSTRUCTION PLAN APPLICATION**

Application No.: \_\_\_\_\_ Date Received: \_\_\_\_\_ Date Filed: \_\_\_\_\_

**OWNERSHIP INFORMATION:**

Property Owner: \_\_\_\_\_

Owner's Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**APPLICANT INFORMATION:**

Name of Applicant(s): \_\_\_\_\_

Applicant(s) Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**DESIGN CONSULTANT INFORMATION:**

Name of Consultant(s): \_\_\_\_\_

Consultant(s) Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**LOCATION OF PROJECT:**

Development Name: \_\_\_\_\_

Address: \_\_\_\_\_ Tax Parcel Number(s): \_\_\_\_\_

Current Land Use: \_\_\_\_\_ Size of Parcel (Sq.Ft. or Acres): \_\_\_\_\_

Legal Description of Property (other than address): \_\_\_\_\_

\_\_\_\_\_

**PRINCIPLES AND STANDARDS:**

- **Plans must follow City of Cottleville Development Ordinances and Guidelines**
- **Plans must follow St. Charles County Standards**
- **Plans must follow original zoning plans, agreements, and/or conditions**
- **Plans must be signed and sealed by a Professional Engineer of the State of Missouri**

**Construction Permit Application / Checklist**

- \_\_\_\_\_ One (1) copy of Construction Plans  
(One (1) full-size set, one (1) half-size set and a pdf version of Construction Plans must be submitted upon final approval of the permit)
- \_\_\_\_\_ A legal description of the property
- \_\_\_\_\_ Permit Fee in the amount of \_\_\_\_\_ (See Fee Schedule)
- \_\_\_\_\_ Copies of approvals from all outside agencies (MDNR, Army COE, County Highway, MoDOT, Fire Protection District, and Utilities as applicable)
- \_\_\_\_\_ Grading Permit Application (Must be completed for any land disturbance activities greater than 10,000 square feet)
- \_\_\_\_\_ Special Use Permit Application (Must be completed for any work within existing public right-of-way)



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APPLICATION AGREEMENT:

By affixing signatures to this application form, the Applicant and Owner hereby verify that: they have reviewed the applicable zoning regulations; they are familiar with the specific requirements relative to this application; and they take full responsibility for this application.

The Applicant/Owner further agrees to allow the City of Cottleville to enter onto the subject property to inspect the land and buildings.

I also certify that the information contained herein is correct to the best of my knowledge and belief. I understand this application, including any plans submitted, is public information. I authorize reproduction of any plans/reports for purposes of application processing and reporting.

Applicant's Signature Print Name Date

Consultant's Signature Print Name Date

This application is made with my full knowledge and consent.

Owner's Signature Print Name Date