



DEPARTMENT OF PUBLIC WORKS

One Detjen Drive | Crestwood, MO 63126 | 314-729-4720

Improvement Plan Permit Application

(Nonrefundable check or cash payment due after review and approval by Director of Public Services)

Application Fee: 1% of the estimated cost of improvements

PERMIT #: _____ Application Date: _____

Project Address: _____

Plat Title: _____

Applicant Name: _____

Contact Address, State, & Zip Code: _____

Phone: _____ Email Address: _____

Property Owner Name (if different from Applicant): _____

Address, State, & Zip Code: _____

Phone: _____ Email Address: _____

Architect/Engineer Name (if different from Applicant): _____

Address, State, & Zip Code: _____

Phone: _____ Email Address: _____

ESTIMATED COST OF IMPROVEMENTS: _____

I hereby certify that the information contained in this application and accompanying documents are correct, and that I will conform to all applicable laws of the City of Crestwood.

Applicant Signature: _____ Date: _____

OFFICE USE ONLY

Approved by: _____ Title: _____ Approval Date: _____

Zoning Section

Municipal Zoning District: _____

Approved By: _____ Date: _____

Structural & Exterior Fire Protection

Use Group Classification: _____

Fire District: Crestwood _____ Affton _____

Approved By: _____ Date: _____

Inspection Necessary: Yes _____ No _____

Comments:

Payment Section

Date Paid: _____ Payment Amount: _____

Payment: Cash _____ Check # _____ Receipt # _____

Received By: _____