

COMMERCIAL RE-OCCUPANCY PERMIT CHECKLIST –
(New Owner, Business Name Remains the Same)
(Commercial Re-Occupancy for City of Fenton)

Complete These Forms

- Re-Occupancy Permit Application – City of Fenton
- Letter of Intent
- Business Owner of Record
- St. Louis County Police – City of Fenton Precinct
- Fenton Fire Protection District – Application for Occupancy Permit

Present These Documents (to the City of Fenton)

- Two (2) copies of site plan that:
 - Is drawn to Scale (example: 1"=30'-0") and the scale indicated on site plan
 - Shows a north arrow
 - Shows the shape of the parcel and the parcel dimensions
 - Shows the street names abutting the parcel
 - Shows the shape of the main building and the building dimensions
 - Shows the dimensioned location of the main building on the parcel
 - Shows the parking spaces and indicates the handicapped parking spaces
 - If a multi-tenant building, indicates your proposed tenant space and dimensions
 - If a multi-tenant building, indicates how many square feet you occupy

- Forms completed above

Pay These Fees to the City of Fenton (due prior to processing)

- \$50.00

Next Steps

- Deliver copy of Fenton Fire Protection District form to District office at 845 Gregory Lane
*please note that FFPD may have a separate fee
- Wait for Call from Community Development Department informing that your paperwork is available for pickup
- Pick up paperwork at Community Development Department

Notes

Occupancy Permit certificate will be mailed to address of applicant once City of Fenton and Fenton Fire Protection District issue occupancy approvals

If amusement machines, devices, or juke boxes will be owned, leased or rented at this location; or if a liquor license is required; please contact City Hall at 636-343-2080 to obtain additional information.

RE-OCCUPANCY PERMIT INSTRUCTIONS
REQUIRED FOR COMMERCIAL BUILDINGS ONLY

A Re-occupancy Permit must be obtained from the City of Fenton prior to a space being occupied. The City of Fenton contracts with St. Louis County to inspect the interior of the building for structural, plumbing, electrical and safety issues. Based on their report and the Fenton Fire Protection District inspection report, the City of Fenton will issue an occupancy permit.

You may not move in equipment or furniture; stock materials, goods or supplies; or train personnel in the building without an occupancy permit issued by the City of Fenton.

ADDITIONAL PERMIT/DEVELOPMENT INFORMATION

- PLEASE SEE CHAPTER 420 - LAND USE MATRIX FOR PERMITTED USES AND USES ALLOWED BY SPECIAL USE PERMIT FOR ALL ZONE DISTRICTS. Each business zone district has regulations that only pertain to that district. It is suggested you get a copy of your district regulations and familiarize yourself with them before starting a project.
- Street address numbers must be readable from the public street. Address numbers must also be placed on the back door if there is one. (Section 505.110.C)
- If signage is to be installed (this includes wall signs, ground signs, etc.), a separate zoning approval is required from the City and St. Louis County may require building permits. (Chapter 430, Article IV)
- You may not park on an unpaved surface. All vehicles must have current tags and may not be in disrepair (flat tires, parts missing, etc.). (Section 505.100.K)
- All exterior trash containers must have lids and must be kept closed at all times. Overflowing containers are not permitted. Exterior grounds must be kept clear of rubbish and trash. (Section 225.020) (Section 505.100.A)
- Trash haulers may not pick up before 6:00 a.m. Trash haulers must have a permit from the City to do business in the City. You should ask to see the permit before contracting with them. (Section 225.050.A)
- You may not put signs in right-of-ways advertising your business (new, sales, open house, etc.) (Section 430.290.A.4)
- A building permit is needed for accessory buildings (sheds, etc.). (Section 425.010.C)
- If you sub-lease space issued to you in your occupancy permit, the sub-lessee must also apply for an occupancy permit. You must re-apply and receive a new occupancy permit for reduced square footage. (Section 435.020)
- If you change the name of your company, bought out by another company or establish another company with its own name, you must apply for a new occupancy permit for that business. (Section 435.020)
- Outdoor displays, sales and storage of merchandise have regulations. Please obtain a copy of the regulations before doing so. (Chapter 425, Article IV)
- Fencing and fencing materials must be approved prior to construction. (Chapter 425, Article VI)
- Occupancy permits must be displayed in front lobbies or areas accessible to the general public. (See Occupancy Permit)
- Driveways leading to a parking lot may not be used for parking. (Section 430.020.C)
- A Special Use Permit may be required for outside storage and storage containers. (Chapter 425) (Section 500.150)
- Installing racking/shelving 8 (eight) feet or over in height needs municipal approval and a building permit.

RE-OCCUPANCY PERMIT APPLICATION
City of Fenton

CITY OF FENTON
625 New Smizer Mill Road; Fenton, MO 63026-3597
636-349-8110

Fee: \$50.00

Date Paid: _____

Received By: _____

Payment: _____

Please type or print

Date of Application: _____

Building Address: _____ Ste. #: _____

Proposed Tenant (Company Name): _____ Phone No. _____

Proposed Tenant (Individual Name): _____

Address: _____ Phone No.: _____

Owner of Building: _____

Address: _____ Phone No.: _____

Subdivision: _____ Lot No.: _____

Required Parking Spaces According to Ordinance: _____

Intended Use of Premises: _____

I hereby certify that the above information is correct:

Signature of Owner

Signature of Authorized Agent

Office Use Only:

ZONING APPROVAL

This is to certify that the above is approved for zoning: Zoning Classification: _____

City Planner

Date

LETTER OF INTENT

For Certificate of Occupancy

CITY OF FENTON

625 New Smizer Mill Road; Fenton, MO 63026-3597

636-349-8110; Fax: 636-343-5657

This signed *Letter of Intent* must accompany completed Application for Occupancy/Re-Occupancy Permit.

Building Address: _____ Ste. # _____

Business/Tenant Name: _____

Proposed Phone No.: (____) _____ Proposed Fax No.: (____) _____

If goods will be sold at retail, provide your eight digit MO Tax ID No. _____, or a certificate of "No Tax Due"

Are you moving from another location in the City of Fenton? Yes _____ No _____

Previous Address: _____ Zip Code _____

Is property located within a flood plain? Yes _____ No _____ NAICS Code (if known) _____

OTHER INFORMATION NEEDED:

Breakdown of Square Feet:

Sq. Ft. of Tenant Space:

_____ Office

_____ Warehouse or retail

_____ Total

Are you planning to have outside storage? Yes _____ / No _____

Number of Handicap Spaces Provided: _____

Number of Employees: Full-Time: _____; Part-Time: _____

Hours of Operation: _____

Number of commercial vehicles owned by the company (if any): _____

TYPE OF BUSINESS OPERATION (please describe in depth the nature of your business). *EXAMPLE:* Administrative office/warehouse for what type of business? If the building is to be used for sales operation, will it be retail sales or wholesale? If you plan to use the building for storage – what type of materials do you intend to store (Gasoline, paint, equipment, etc.)? Manufacturers should mention what product will be manufactured and what type of equipment will be used:

(continue on back side if needed)

The undersigned herewith applies for an Occupancy Permit for the above described premises under the terms of the City of Fenton Zoning Code. The permit fee must be paid for at time of submittal. This letter of intent is not a permit. The premises shall not be occupied until all discrepancies (if any) are corrected and an occupancy permit is issued by the Fenton Fire Protection District and the City of Fenton.

Signed this _____ day of _____, 20____.

Applicant's Signature: _____

Applicant Name (please print): _____ Title: _____

Applicant's Address: _____ Zip: _____

Applicant Telephone No.: (____) _____ Email: _____

BUSINESS OWNER OF RECORD

**CITY OF FENTON
625 NEW SMIZER MILL ROAD
FENTON, MO 63026
636-349-8110
636-343-5657 FAX**

Notices sent from this agency will be addressed to the business owner of record or their assigned designee at the address which the owner has provided to the Community Development Department. Service Notices, by the Community Development Department, will be deemed delivered at the last address of record, five (5) days after such mailing, first class and postage prepaid, when placed in a regular depository of the United States Postal Service.

PLEASE PRINT ALL INFORMATION

Name of Corporation: _____

Business Name: _____

Business Location Address: _____

Name of Owner/Designee of Business: _____

Owner/Designee Mailing Address: _____
(other than business location)

Owner/Designee Phone Number: _____
(other than business phone number)

It is the responsibility of the Business Owner or the Designee, whose signature appears below, to notify this Department of any changes in the information that is stated above. Notice of change in principals, address or ownership will be sent by United States mail, postage prepaid, or hand delivered in writing on this form to the Community Development Department.

Name (Please Print)

Title

Signature

Date



Saint Louis COUNTY POLICE

Colonel Mary T. Barton
Chief of Police
7900 Forsyth Boulevard
St. Louis, Missouri 63105
Voice/TTY (636) 529-8210

City of Fenton Precinct

Dear Fenton Business:

The St. Louis County Police Department, City of Fenton Precinct is committed to serving our community. As a member of our business community, we intend to be responsive to your needs. In the event of an emergency, it is important that we are able to contact the appropriate business representative. The completion and return of this letter will assist us in maintaining an up-to-date emergency contact listing for your business. Please take a few moments to complete and fax this letter to the Fenton Precinct at **636-343-4732** or email to adilks@stlouisco.com. As is the case with all communications, we will treat this as privileged information and will safeguard it accordingly. If you have any questions or would like an officer to come by, please call the Precinct at 636-349-8120.

Sincerely,

Thank you
Captain R. Kevin Lawson

Captain R. Kevin Lawson
City of Fenton Precinct

Name of Business: _____

Owner/Manager of Business: _____

Fenton Address: _____

Phone Number: _____ Fax Number: _____

Is the building alarmed? Yes _____ NO _____

Alarm Company _____

Email _____

In case of Emergency, please notify one of the below listed contacts:

Name (1) _____ Home Phone: _____

Cell: _____ Pager: _____

Name (1) _____ Home Phone: _____

Cell: _____ Pager: _____

Name (1) _____ Home Phone: _____

Cell: _____ Pager: _____



"Committed to Our Citizens Through Neighborhood Policing"

FENTON FIRE PROTECTION DISTRICT

845 GREGORY LANE, FENTON, MO 63026 636-343-4188-phone 636-343-4451-fax



www.fentonfire.org

FEE: \$50
NON-REFUNDABLE
DUE PRIOR TO
INSPECTION

APPLICATION FOR OCCUPANCY PERMIT

| APPLICANT / OCCUPANT | | | | |
|---|--------|---|-----------------|-------------|
| BUSINESS ADDRESS: | | | SUITE | |
| BUSINESS NAME: | | | | |
| BUSINESS OWNER: | | | CELL PHONE: | |
| BUSINESS OWNER EMAIL: | | | HOME PHONE: | |
| TYPE OF BUSINESS: | | | BUSINESS PHONE: | |
| SQUARE FOOTAGE: | | HAZARDOUS MATERIAL ON SITE: <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, LIST ITEMS BELOW: | | |
| FIRE DEPARTMENT KNOX BOX PRESENT: <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, DESCRIBE LOCATION: | | | | |
| | | | | |
| EMERGENCY CONTACT INFORMATION: | | | | |
| NAME: | EMAIL: | HOME: | CELL: | |
| NAME: | EMAIL: | HOME: | CELL: | |
| NAME: | EMAIL: | HOME: | CELL: | |
| BUILDING/PROPERTY OWNER INFORMATION | | | | |
| BUILDING OWNER NAME: | | | | |
| ADDRESS: | | CITY/STATE/ZIP: | | |
| EMAIL: | | HOME: | CELL: | |
| SIGNATURE | | | | |
| THE UNDERSIGNED HEREWITH APPLIES FOR AN OCCUPANCY PERMIT OF ABOVE LISTED PREMISE AND AGREES TO COMPLY WITH THE ORDINANCES ADOPTED BY THE FENTON FIRE PROTECTION DISTRICT. | | | | |
| SIGNATURE: | | | TITLE: | |
| PRINT NAME: | | | DATE: | |
| OFFICE USE ONLY | | | | |
| FEE PAID: | DATE: | STILL ALARM AREA: | USE GROUP: | CONST TYPE: |
| SPRINKLERED: <input type="checkbox"/> YES <input type="checkbox"/> NO | | | BUSINESS CLASS: | |
| INSPECTION NOTES: | | | | |
| | | | | |
| | | | | |
| | | | | DATE: |