

	City of Dardenne Prairie Engineering Division 2032 Hanley Rd. Dardenne Prairie, MO 63368	Application For Engineering Permits	OFFICE USE ONLY
			Date Received:
			Received by:
			Forward to:
			Check No.:

NAME OF PROJECT/DEVELOPMENT

OWNER/DEVELOPER				
NAME	CONTACT	PHONE		
		EMAIL		
ADDRESS	STREET	CITY	STATE	ZIP CODE

ENGINEER/CONTRACTOR				
NAME	CONTACT	PHONE		
		EMAIL		
ADDRESS	STREET	CITY	STATE	ZIP CODE

<p>PROJECT INFORMATION</p> <p>All submittals must be accompanied by a completed Application for Engineering Permit, completed Engineering Improvement Plan Submittal Checklist, submittal fee, and necessary attachments to perform a complete review of the project. All incomplete submittals may be returned without review or comment.</p> <p style="text-align: center;">IF THIS SUBMITTAL IS A REVISION AND/OR ADDENDUM TO A PREVIOUS PROJECT, PLEASE NOTE THE PERMIT NUMBER, _____</p> <p style="text-align: center;">TYPE OF PERMIT APPLIED FOR</p> <ul style="list-style-type: none"> <input type="checkbox"/> LAND DISTURBANCE (5000 SQFT+) <input type="checkbox"/> GRADING (10,000 SQFT+) <input type="checkbox"/> SITE IMPROVEMENT/CONSTRUCTION <input type="checkbox"/> STORM WATER DRAINAGE FACILITIES <input type="checkbox"/> STREET, OTHER PUBLIC, AND PRIVATE SITE IMPROVEMENTS <input type="checkbox"/> UTILITY EXCAVATION FACILITY <p style="text-align: center;">ATTACHMENTS:</p> <ul style="list-style-type: none"> <input type="checkbox"/> LAND DISTURBANCE APPLICATION FEE <input type="checkbox"/> GRADING PERMIT APPLICATION FEE <input type="checkbox"/> CONSTRUCTION PERMIT APPLICATION FEE <input type="checkbox"/> IMPROVEMENT PLAN SUBMITTAL CHECKLIST <input type="checkbox"/> CALCULATIONS <input type="checkbox"/> SOILS REPORT <input type="checkbox"/> OTHER _____ <p style="text-align: center;">PLANNING AND ZONING APPROVAL PZ-_____ DATE: _____</p> <p style="text-align: center;">BOARD OF ALDERMEN APPROVAL: ORD.#_____ DATE: _____</p>

I certify that I am familiar with the information contained in this application, and that to the best of my knowledge, such information is true, complete and accurate. If granted this permit, I agree all construction will be in accordance with the approved improvement plans and with current requirements of the City of Wentzville, Missouri.

PERMITEE: NAME AND OFFICIAL TITLE (TYPE OR PRINT)	PHONE NO.
	SSN or Tax ID#
SIGNATURE	DATE SIGNED

NOTICE: CALL 1-800-DIG-RITE FOR UTILITY LOCATIONS PRIOR TO EXCAVATION