



1393 Big Bend Road, Suite F • Twin Oaks, MO 63021
(636) 225-7873 • fax (636) 225-6547 • www.vil.twin-oaks.mo.us

BUILDING PERMIT APPLICATION

Date of Application: _____ Project Address: _____

Owners Name: _____ Phone Number: _____

Address: _____ Estimated Project Cost: _____

Check One

- District A - Single Family Residential Dwelling
- District B - Single Family Residential Attached Dwelling
- District C - Planned Shopping Center

Type of Project

- New Construction
- Building Addition
- Building Alteration
- Repair
- Replacement
- Demolition
- Excavation
- Sign
- Other

Work to Be Completed

- Above Ground Pool
- In Ground Pool
- Patio
- Fire Damage
- Fence
- Interior Finish
- Shed
- Fireplace

Description of Project or Work To Be Completed:

Work Being Completed by: Do It Yourself Outside Contractor

Contractor Name: _____

Address: _____

Phone #: _____

Applicant Signature: _____

Approval _____ Date: _____

For Office Use Only

Application Fee: Residential and Commercial \$25.00

Amount Received: _____ Date Received: _____ Cash/Check #: _____