



O'Fallon Fire Rescue

1215 Taylor Rd
O'Fallon, Illinois 62269
Phone: (618) 624-4515
Fax: (618) 632-1429
EMERGENCY DIAL 911

Engine House #1
(618) 624-4519
Engine House #2
(618) 624-4520
Engine House #3
(618) 624-4533
Engine House #4
(618) 624-4544

BUILDING PERMIT APPLICATION

Date: ____/____/____

Contractor Name: _____

Address: _____

City, State: _____

Phone 1: _____ Phone 2: _____

Fax: _____ Email: _____

The above listed person(s) hereby make application for:

Business Name: _____

Address: _____

City, State: _____

Cost of the project: \$ _____

Total amount due per fee schedule: \$ _____

I have read and understand the fees and terms provided to me. The building shall meet or exceed the 2012 International Codes, latest NFPA standards, and any state codes that apply. I further agree to call for all required inspections and provide at least twenty-four hours advance notice to avoid a special inspection charge.

(Applicant Signature)

(Date)

All plans and documents for the fire department shall be delivered to:

O'Fallon Public Safety Building
Attn: O'Fallon Fire Rescue
285 N. Seven Hills Road
O'Fallon, Illinois 62269