



CITY OF HERCULANEUM

1 PARKWOOD COURT
HERCULANEUM, MISSOURI 63048
BUSINESS: 636.475.4447 – FAX: 636.475.6191
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INTERIOR REMODEL PERMIT

Date: _____ Permit #: _____

Applicant: _____

Address: _____

Phone: _____

Location of Service: _____

Remarks: Must meet all Herculaneum 2015 Building Codes

Materials and specification information must be submitted for approval by the Building Code Official before commencing any project.

ALL CONTRACTORS & SUB-CONTRACTORS MUST BE LICENSED THROUGH THE CITY OF HERCULANEUM

Estimated Cost: _____

Permit Fee: _____

INSPECTION APPROVALS:
1. Rough In Electrical
2. Rough In Plumbing
3. Rough In Framing
4. Finish

A 24 HOUR NOTICE MUST BE GIVEN TO SCHEDULE FOR INSPECTIONS

Applicant Signature: _____
(Signature) (Print Name)

Building Code Official: _____