

TRAILER PERMIT

FOR CITY USE ONLY:

Permit # _____

Issue Date: _____



APPLICATION FOR TEMPORARY CONSTRUCTION TRAILER

Business/Project _____

Property Owner _____

Address _____

Phone _____

E-Mail Address _____

Contractor Name _____

Contact Person _____

Address _____

Phone _____

E-Mail Address _____

Trailer Location Address (if different from above) _____

SUBMITTAL REQUIREMENTS (submit 3 paper copies of all documents):

1. Basic site plan showing proposed location of trailer
2. Details on the method used to secure the trailer to the ground (to resist 115 mph wind loads)
3. Plan showing tie down and foundation blocking locations
4. Details of the landing and stairs leading to the trailer, including handrail and guardrail details, and dimensions of tread (11" min.) and risers (7" max.)
5. Indication if permanent power is provided to the trailer
6. Indication of what method will be used to provide sewer and water to the trailer
7. (If double-wide assembly) Details of the splice plate which ties the two halves of the trailer together at the floor, roof, and end walls
8. \$100 fee

INFORMATION

SERVICES TO BE USED AT THE TRAILER:

- Sanitary Sewer
- Portable Toilet
- Water
- Electric Service

INSTALLATION AND REMOVAL DATES:

Anticipated Install Date: _____

Anticipated Removal Date: _____

AN INSPECTION IS REQUIRED ONCE THE TRAILER HAS BEEN PLACED.
CALL 314-291-6550 TO SCHEDULE THE INSPECTION (AT LEAST 24 HOURS IN ADVANCE).

ALL SIGNAGE (TEMPORARY OR PERMANENT) MAY REQUIRE A PERMIT. CONTACT ZONING AT 314-291-6550.

ACCEPTANCE

I hereby certify that the information contained in this application and accompanying plans is correct, and that I will conform to all applicable laws of the City of Maryland Heights.

APPLICANT ACCEPTANCE _____ DATE _____

I hereby authorize the above named applicant and/or contractor to install this trailer at the location address listed on this application.

OWNER ACCEPTANCE _____ DATE _____

APPROVALS

City Planner _____ Date _____

Building
Commissioner/
Plan Reviewer _____ Date _____

FOOTING
Inspector _____ Date _____

FINAL
Inspector _____ Date _____