

CITY OF VALLEY PARK, MO

APPLICATION FOR RESIDENTIAL OCCUPANCY PERMIT

DATE _____

All questions must be answered (enter N/A if not applicable)

I hereby request authorization to occupy _____
(address) in the City of Valley Park, Missouri as a dwelling unit on or about _____ (Date)

NAME OF HOUSEHOLD HEAD _____

Present address _____

Drivers License _____ Date of Birth _____

Social Security Number _____ Are you a US Citizen Yes or No _____

NAME OF SPOUSE (if intending to occupy unit) _____

Present address _____

Drivers License _____ Date of Birth _____

Social Security Number _____ Are you a US Citizen Yes or No _____

CHILDREN OF HOUSEHOLD HEAD WHO WILL OCCUPY:

First and Last Names	Age	Date of Birth	Social Security #	US Citizen Yes or No

ALL OTHER PERSON WHO WILL OCCUPY THE DWELLING UNIT:

Name	Relationship To Head	Age	Date of Birth	Social Security #	US Citizen Yes or No

Total Persons in Household _____ Total Children _____ Total Unrelated Individuals _____

Rent _____ (if renting list name of property owner below) Own _____

Name of Property Owner and Address _____

*Any health alert or physical handicapped that we should be aware of _____ yes _____ no
(If yes, please list them below)

I CERTIFY THAT I AM THE PROPOSED HEAD OF HOUSEHOLD AND THAT THE ANSWERS CONTAINED
HEREIN ARE TRUE AND ACCURATE IN ALL RESPECTS TO THE BEST OF MY KNOWLEDGE AND BELIEF:

Signature of Applicant (s): _____

I CERTIFY THAT I AM THE OWNER OF THE ABOVE PROPERTY AND HAVE VERIFIED THE ABOVE INFOR-
MATION TO BE TRUE AND ACCURATE IN ALL RESPECTS TO THE BEST OF MY KNOWLEDGE AND BELIEF:

Signature of Property Owner: _____

THIS IS NOT A PERMIT. DO NOT OCCUPY THE PREMISES UNTIL A PERMIT IS ISSUED.

CONTACT NAME AND PHONE NUMBER _____

PLEASE SUBMIT COPY OF DRIVERS LICENSE WITH APPLICATION