

## APPLICATION FOR RESIDENTIAL OCCUPANCY PERMIT

City of Louisiana, MO 202 S. Third St. 63353

Inspection Addre	ss:				
This Property Shall Be Occupied By The:				er (Buyer)	Renter
Name of Applica	nt:				
I Am The:	Owner	Seller's Agent	Buyer	Renter	
Property Owner:					
Owner's Address:		City:		State:	Zip:
Owner's Phone N	Number:				
Name of Selling/	Leasing Agent: _				
Agency Name an	d Address:				
Agent's Phone N	umber:				
Buyer's Name: _					
Buyer's Address:		City:		State:	_ Zip:
Buyer's Phone N	umber:				
Renter's Name: _					
Renter's Current Address:		City: _		State:	_ Zip:
Renter's Phone N	Jumber:				
		Office U	se Only		
Appointment Tin	ne:	_ AM PM	Inspection D	Date:	
Inspector:			Occupant Limit:		
Compliance Number:			Fee: \$		