



Cottleville Fire Protection District

CARNIVAL/FAIR PERMIT APPLICATION

Permit Fee: \$70

Event Location

Address: _____

City: _____ Zip Code: _____

Property Owner

Name: _____ Phone #: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Carnival/Amusement Contractor: _____

Event Date(s): _____

Applicant

Name: _____ Phone #: _____

Email: _____

(A copy of the permit will be emailed to the email address provided)

By signing below, the applicant is affirming that he/she is the property owner, or an authorized agent for the property owner, and that the property owner has granted permission for the event.

Signature: _____ Date: _____

***** Do Not Write Below – Office Use Only *****

Permit #: _____

Date Paid: _____ Method of Payment: _____

1385 Motherhead Road | St. Charles, MO 63304
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