	NEL OF PUBLIC S			DIVISION OF FIRE S			NOTE: ON	AP E APPLICATIO	PLIC	CATION FO	R VAR	ED FOR EA	CH UNIT C	F EQUIPMEN	
LINE NAME     DAVER ADDRES     DAVE	<b>N</b>	Ñ			E991		DATE		STAT	E ID / VARIANO	CE #	BOAR	D APPROV	'AL	
GUNNER NAME         DØNBE ADDRESS         Ling ALDRESS           BILLING MANE (IF DEFERENT FROM OWNER)         BILLING ALDRESS         BILLING CITY, STATE, 2P           LICCATION MANE         LICCATION HAME         LICCATION HAME           LICCATION MANE         LICCATION HAME         LICCATION HAME           LICCATION MANE         LICCATION HAME         LICCATION HAME           LICCATION HAME         LICCATION HAME         ALTIMUTY           TYPE OF EQUIPMENT         BULLIONG USAGE           ALTIMUTY         TYPE OF EQUIPMENT         BULLIONG USAGE           ALTIMUTY         TYPE OF EQUIPMENT         BULLIONG USAGE           ALTIMUTON         Image (STM)         HORMTALINERTUTIONAL           ALTERATION         Image (STM)         HORMTALINERTUTIONAL           MADE ALTERATION         Image (STM)         HORMTALINERTUTIONAL           MARK ALTERATION         Image (STM)         HORMTALINERTUTIONAL           MARK ALTERATION         Image (STM)         COMMERCIALINGUESTIAL           AROULL INSPECTION         Image (STM)         COMMERCIALINGUESTIAL           AROULL INSPECTION         Image (STM)         Image (STM)         Image (STM)           IMARK ALTERATION         Image (STM)         Image (STM)         Image (STM)           IMARK ALTERATION <td></td> <td></td> <td>JEFFERSON</td> <td>N CITY, MO 65102</td> <td>1744</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>YES</td> <td>□ NO</td>			JEFFERSON	N CITY, MO 65102	1744								YES	□ NO	
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LOCATION COUNTY  LOCATION PICNE  ACTIVITY  TYPE OF EQUIPMENT  ACTIVITY  ACTIVITY  TYPE OF EQUIPMENT  ACTIVITY  ACTIVITY ACTIVITY ACTIVITY  ACTIVITY  ACTIVITY  ACTIVITY ACTIV	BILLING N	BILLING NAME (IF DIFFERENT FROM OWNER)				BILLING ADDRESS			BILLING CITY, STATE, ZIP						
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ACTIVITY         TYPE OF EQUIPMENT         BUILDING USAGE           NEW INSTALATION         WIT BOLER (STM)         OFFICE/OUT BUILDING           ALTERATION         PT BOLER (STM)         HOBERTALINSTITUTIONAL           INITIAL INSPECTION         CATIRON BOLER (STM)         COMMERCIALINSUSTRIAL           ANNUAL INSPECTION         CAST IRON BOLER (STM)         COMMERCIALINSUSTRIAL           ANNUAL INSPECTION         CAST IRON BOLER (STM)         COMMERCIALINSUSTRIAL           OTHER         FTB BOLER (MMH)         RETAIL           COMERCIAL         FTB BOLER (MMH)         SCHOOLUBRAR VIEDUCATIONAL           OTHER         FTB BOLER (MMH)         PARKING GARAGE           COMPLETION         FTB BOLER (MMH)         MULTIFAMILY RESIDENCE           FSWM (HOT WTR HTR)         MULTIFAMILY RESIDENCE         FSWM (HOT WTR HTR)           COMPLETION         FEERLINANDER         OTHER         OTHER           CARACE         FSWM (HOT WTR HTR)         MULTIFAMILY RESIDENCE         OTHER           CARACE         FSWM (HOT WTR HTR)         MULTIFAMILY RESIDENCE         OTHER           CANNUF/CTURER         OVTE NSTALED         SERVICE         OTHER           CANNUF/CTURER         GARAGE         OTHER         OTHER           CANNUF/CTURER         RENGERETION OF VIO	LOCATION	NAME			LO	LOCATION ADDRESS			LOCATION CITY, STATE, ZIP						
ACTIVITY         TYPE OF EQUIPMENT         BUILDING USAGE           NEW INSTALATION         WIT BOLER (STM)         OFFICE/OUT BUILDING           ALTERATION         PT BOLER (STM)         HOBERTALINSTITUTIONAL           INITIAL INSPECTION         CATIRON BOLER (STM)         COMMERCIALINSUSTRIAL           ANNUAL INSPECTION         CAST IRON BOLER (STM)         COMMERCIALINSUSTRIAL           ANNUAL INSPECTION         CAST IRON BOLER (STM)         COMMERCIALINSUSTRIAL           OTHER         FTB BOLER (MMH)         RETAIL           COMERCIAL         FTB BOLER (MMH)         SCHOOLUBRAR VIEDUCATIONAL           OTHER         FTB BOLER (MMH)         PARKING GARAGE           COMPLETION         FTB BOLER (MMH)         MULTIFAMILY RESIDENCE           FSWM (HOT WTR HTR)         MULTIFAMILY RESIDENCE         FSWM (HOT WTR HTR)           COMPLETION         FEERLINANDER         OTHER         OTHER           CARACE         FSWM (HOT WTR HTR)         MULTIFAMILY RESIDENCE         OTHER           CARACE         FSWM (HOT WTR HTR)         MULTIFAMILY RESIDENCE         OTHER           CANNUF/CTURER         OVTE NSTALED         SERVICE         OTHER           CANNUF/CTURER         GARAGE         OTHER         OTHER           CANNUF/CTURER         RENGERETION OF VIO															
NEW INSTALLATION         WT BOILER (STM)         OFFICE/GOVT BUILDING           ALTERATION         FTF BOILER (STM)         HOOPFICE/GOVT BUILDING           MAUR ALTERATION         FTF BOILER (STM)         CAURCHRELIGIOUS           INITIAL INSPECTION         CAST IRON BOILER (STM)         COMMERCIAL/INDUSTRIAL           ANNUAL INSPECTION         CAST IRON BOILER (MWH)         RETAIL           REINSPECTION         FTF BOILER (MWH)         REINSPECTION           OTHER         FTFB BOILER (MWH)         PARKING GARAGE           OTHER         FTFB BOILER (MWH)         PARKING GARAGE           OTHER         FSWH (HOT WH IRR)         MULTUFAMILY RESIDENCE           RECEVER AIR OR OTHER         BANK           INDUPATION OF VIOLATION OR VARIANCE: (F APPLICABLE)         SERIAL NUMBER         CAPACITY           FUEL TYPE         FIRING METHOD         SPECIFIC LOCATION         LAST INSPECTION DATE         VOLUMEANTS SURFACE           DESCRIPTION OF VIOLATION OR VARIANCE: (F APPLICABLE)         COMPLIANCE IS COMPLETED         VOLUMEANTS SURFACE         VOLUMEANTS SURFACE           DESCRIPTION OF VIOLATION OR VARIANCE: (F APPLICABLE)         COMPLIANCE IS COMPLETED         VOLUMEANTS SURFACE           SIGNATURE         OFFOR SIGNATURE         SURPECTOR SIGNATURE         SURPECTOR SIGNATURE	LOCATION COUNTY				LO	LOCATION PHONE			NUMBER OF UNITS AT LOCATION						
ALTERATION PT BOLLER (STM) HOSPITALINSTITUTIONAL ALTERATION PT BOLLER (STM) COLURCH/RELGIOUS INITIAL INSPECTION COLURCH/RELGIOUS INITIAL INSPECTION COLURE (INVI) COMMERCIAL/INDUSTRIAL ANNUAL SPECTION PT BOLLER (INVI) RESIDENCE COLURE (INVI) PTER BOLLER (INVI) SCHOOL/UBRARYLEUCATIONAL OTHER PTER BOLLER (INVI) PARING GARAGE COLURE (INVI) MULTIFAMILY RESIDENCE COMPLIANCE (INVI) MULTIFAMILY RESIDENCE COMPLIANCE (INVI) MULTIFAMILY RESIDENCE COMPLIANCE (INVI) MULTIFAMILY RESIDENCE COMPLIANCE DATE COMPLIANCE (INVI) MULTIFAMILY RESIDENCE COMPLIANCE IS COMPLETED SIGNATURE OF CONTACT PERSON AT LOCATION	ΑCΤΙVITY					TYPE OF EQUIPMENT			BUILDING USAGE						
MAJOR ALTERATION         FTFB BOILER (STM)         CHURCH/RELIGIOUS           INITIAL INSPECTION         CAST IRON BOILER (STM)         COMMERCIAL/INDUSTRIAL           ANUALI INSPECTION         WT BOILER (HWH)         REINSPECTION           REINSPECTION         FT BBOILER (HWH)         SCHOOL/LIBRARY/EDUCATIONAL           OTHER         FTFB BOILER (HWH)         SCHOOL/LIBRARY/EDUCATIONAL           OTHER         CI BOILER (HWH)         MOTELHOTEL           I         FSPW (HOT WIT HTR)         MOTELHOTEL           I         CI BOILER (HWH)         MURSINGRETIREMENT HOME           I         OTHER         NURSINGRETIREMENT HOME           I         OTHER         NURSINGRETIREMENT HOME           I         OTHER         ISPCTURENT           MANUFACTURER         DATE INSTALLED         SERIAL NUMBER           I         OPECIFIC LOCATION         LAST INSPECTION DATE         VOLIMENTS SUPPACE           DESCRIPTION OF VIOLATION OR VARIANCE: (IF APPLICABLE)         COMPLIANCE IS COMPLETED         INSPECTOR SIGNATURE           SIGNATURE OF CONTACT PERSON AT LOCATION         INSPECTOR SIGNA	NE	W INST.	ALLATION			WT BOILER (STM)				OFFICE	/GOVT I	BUILDING	i		
INITIAL INSPECTION       CAST IRON BOILER (STM)       COMMERCIAL/INDUSTRIAL         ANNUAL INSPECTION       IFT BOILER (HWH)       RETAIL         REINSPECTION       IFT BOILER (HWH)       SchOol/LIBRARY/EDUCATIONAL         OTHER       IFT BOILER (HWH)       PARINIG GARAGE         I       IFT BOILER (HWH)       PARINIG GARAGE         I       IFT BOILER (HWH)       MULTUFAMILY RESIDENCE	ALT	ALTERATION				FT BOILER (STM)				HOSPITAL/INSTITUTIONAL					
ANNUAL INSPECTION     WT BOILER (HWH)     RETAIL       REINSPECTION     FT BOILER (HWH)     SCHOOLLIBRATY/EDUCATIONAL       OTHER     FTFB BOILER (HWH)     MUTUF/AMILY RESIDENCE       I     CI BOILER (HWH)     MUTUF/AMILY RESIDENCE       I     RECEIVER (AIR OR OTHER)     BANK       I     I     RECEIVER (AIR OR OTHER)     BANK       I     I     OTHER     OTHER       I     I     OTHER     OTHER       I     I     OTHER     INJRSING/RETIREMENT HOME       I     I     INTER     INSTALLED       I     INSTALLED     SECIFIC LOCATION     LAST INSPECTION DATE       I     INSTALLED     SECIFIC LOCATION     COMPLIANCE SURFACE	MA	JOR AL	TERATION			FTFB BOILER (STM)				CHURCH/RELIGIOUS					
REINSPECTION       FT BOILER (HWH)       SCHOOL/LIBRARY/EDUCATIONAL         OTHER       FTB BOILER (HWH)       PARKING GARAGE         CI BOILER (HWH)       MULT/FAMILY RESIDENCE         COTHER       OTHER         CI CI CONTACT RESPONSE REQUIRED WHEN COMPLIANCE IS COMPLETED         DESCRIPTION OF VIOLATION OR VARIANCE: (IF APPLICABLE)         COMPLIANCE IS COMPLETED         WRITTEN RESPONSE REQUIRED WHEN COMPLIANCE IS COMPLETED         UNREPECTOR BIONATURE         SIGNATURE OF CONTACT PERSON ATLOCATION	INI	INITIAL INSPECTION				CAST IRON BOILER (STM)				COMME	RCIAL/I	NDUSTRI	AL		
OTHER       FTFB BOILER (HWH)       PARKING GARAGE         CI BOILER (HWH)       MULTUFAMILY RESIDENCE         RECEIVER (AIR OR OTHER)       MOTELHOTEL         RECEIVER (AIR OR OTHER)       BANK         OTHER       NURSING/RETIREMENT HOME         MANUFACTURER       OTHER         PRECIPIC LOCATION       LAST INSPECTION DATE         VOLUMENTO OF VIOLATION OR VARIANCE: (IF APPLICABLE)       COMPLIANCE IS COMPLETED         WRITTEN RESPONSE REQUIRED WHEN COMPLIANCE IS COMPLETED       SIGNATURE OF CONTACT PERSON AT LOCATION	AN	ANNUAL INSPECTION				WT BOILER (HWH)				RETAIL					
CINICITY       CINICITY       CINICITY       MULTUFAMILY RESIDENCE         CINICITY       CINICITY       MOTEL/HOTEL       MOTEL/HOTEL         CINICITY       RECEIVER (AIR OR OTHER)       BANK       MULTUFAMILY RESIDENCE         CINICITY       RECEIVER (AIR OR OTHER)       BANK       MULTUFAMILY RESIDENCE         CINICITY       OTHER       NURSING/RETIREMENT HOME       OTHER         CINICITY       OTHER       NURSING/RETIREMENT HOME       OTHER         MANUFACTURER       DATE INSTALLED       SERIAL NUMBER       CAPACITY       SV CAPACITY         FUEL TYPE       FIRING METHOD       SPECIFIC LOCATION       LAST INSPECTION DATE       VOLUME/HTG SURFACE         DESCRIPTION OF VIOLATION OR VARIANCE: (IF APPLICABLE)       COMPLIANCE DATE       COMPLIANCE DATE         WRITTEN RESPONSE REQUIRED WHEN COMPLIANCE IS COMPLETED       INSPECTOR SIGNATURE       SUGNATURE OF CONTACT PERSON AT LOCATION	RE	REINSPECTION				FT BOILER (HWH)				SCHOOL/LIBRARY/EDUCATIONAL					
Image: Construint of the second state of the second sta	ОТ	OTHER				FTFB BOILER (HWH)				PARKIN	G GARA	GE			
Image: Construint of the second structure of contract person at location       Image: Contract person at location       Image: Contract person at location       Image: Contract person at location         Image: Contract person at location       Image: Contract person at location       Image: Contract person at location       Image: Contract person at location					CI BOILER (HWH)				MULTI/F	AMILY I	RESIDEN	CE			
OTHER       NURSING/RETIREMENT HOME         OTHER       OTHER         MANUFACTURER       DATE INSTALLED         FUEL TYPE       FIRING METHOD         SPECIFIC LOCATION       LAST INSPECTION DATE         VOLUME/HTG SURFACE         DESCRIPTION OF VIOLATION OR VARIANCE: (IF APPLICABLE)         COMPLIANCE DATE         WRITTEN RESPONSE REQUIRED WHEN COMPLIANCE IS COMPLETED         SIGNATURE OF CONTACT PERSON AT LOCATION					FSWH (HOT WTR HTR)				MOTEL/	HOTEL					
Image: Constant Person at Location       Image: Constant Person at Location       OTHER         Image: Constant Person at Location         Image: Constant Person at Location       Image: Constant Person at Location       Image: Constant Person at Location       Image: Constant Person at Location       Image: Constant Person at Location         Signature of contact Person at Location       Image: Constant Person at Location       Image: Constant Person at Location       Image: Constant Person at Location					RECEIVER (AIR OR OTHER)				BANK						
MANUFACTURER       DATE INSTALLED       SERIAL NUMBER       CAPACITY       SV CAPACITY         FUEL TYPE       FIRING METHOD       SPECIFIC LOCATION       LAST INSPECTION DATE       VOLUME/HTG SURFACE         DESCRIPTION OF VIOLATION OR VARIANCE: (IF APPLICABLE)       COMPLIANCE DATE       COMPLIANCE DATE         WRITTEN RESPONSE REQUIRED WHEN COMPLIANCE IS COMPLETED       SIGNATURE OF CONTACT PERSON AT LOCATION       INSPECTOR SIGNATURE					OTHER				NURSING/RETIREMENT HOME						
FUEL TYPE       FIRING METHOD       SPECIFIC LOCATION       LAST INSPECTION DATE       VOLUME/HTG SURFACE         DESCRIPTION OF VIOLATION OR VARIANCE: (IF APPLICABLE)       COMPLIANCE DATE         WRITTEN RESPONSE REQUIRED WHEN COMPLIANCE IS COMPLETED         SIGNATURE OF CONTACT PERSON AT LOCATION       IMSPECTOR SIGNATURE									OTHER						
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SIGNATURE OF CONTACT PERSON AT LOCATION INSPECTOR SIGNATURE	DESCR	RIPTION	OF VIOLAT	ION OR VARIANCE	: (IF A	APPLICABLE)						COMP	LIANCE	DATE	
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