

Application for Certificate of Occupancy

An application for a Certificate of Occupancy is made to the Building Official of the City authorizing the use of land or building as further herein described.

A. Information about the application address:

Address: _____	Suite #: _____
Proposed Business Name: _____	
Describe the proposed use of the land, building or space: _____ _____	
Gross Floor sq. ft.: _____	
List previous use if known: _____	

B. Information about the proposed business owner:

Name of individual or name of officer of company: _____	
Mailing address (different than above): _____	Suite: _____
City: _____	State: _____ Zip Code: _____
TDL or other picture ID No: _____	email: _____
Phone: (_____) _____	Fax: (_____) _____

Limited Sales & Use Tax Certificate No.: _____ Tax Exempt No.: _____

C. Type of Certificate of Occupancy applied for (check as applicable):

<input type="checkbox"/> New Tenant	<input type="checkbox"/> Clean and Show	<input type="checkbox"/> Shell Building (No Occupancy/House Lights)
<input type="checkbox"/> Existing Business, New Owner	<input type="checkbox"/> Same Business Owner, New Name	<input type="checkbox"/> Expanding Lease Space

D. Individual completing this application must also complete and attach the Certificate of Occupancy Questionnaire.

E. Information about the applicant (If the applicant is not the same person as listed in Section B above, applicant must complete this section):

Applicant's Name: _____	
Applicant's Mailing Address (different than above): _____	
City: _____	State: _____ Zip Code: _____
TDL or other picture ID No: _____	email: _____
Phone: (_____) _____	Fax: (_____) _____

As the applicant, I represent that the information contained in this application is true and correct to the best of my knowledge and that I am an authorized agent of the business entity making the application.

Applicant's Signature: _____ Date: _____

DO NOT WRITE BELOW THIS LINE — FOR OFFICE USE ONLY

Zoning: _____

Change of Use: Y N B.I. Inspection Required: Y N Inspected by: _____ Date: _____

Fees: \$ _____

App. reviewed by: _____ Date: _____ App. Denied/Approved by _____ Date _____

Rev. 12/03