

# CERTIFICATE OF OCCUPANCY APPLICATION



DATE \_\_\_\_\_ PERMIT NUMBER \_\_\_\_\_

BUSINESS NAME \_\_\_\_\_ TYPE OF BUSINESS \_\_\_\_\_

ADDRESS \_\_\_\_\_

**NAME OF BUSINESS OWNER(S)** \_\_\_\_\_

ADDRESS (IF DIFFERENT FROM ABOVE) \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

**OWNER OF BUILDING** \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

DESCRIBE EXACT USE OF BUILDING: \_\_\_\_\_

\_\_\_\_\_

PREVIOUS USE OF BUILDING/SUITE \_\_\_\_\_

## APPLICANT ACKNOWLEDGEMENT

Applicant agrees that the Certificate of Occupancy shall be posted in a conspicuous location, and will operate subject to the City's issuance of the Certificate of Occupancy.

I, \_\_\_\_\_, hereby agree to comply with the above-described terms in this Application for Certificate of Occupancy.

\_\_\_\_\_ DATE \_\_\_\_\_

APPLICANT

## CITY STAFF USE ONLY (PLEASE SIGN AND DATE IF APPROVED)

BUS LICENSE \_\_\_\_\_ DATE \_\_\_\_\_ HEALTH DEPT \_\_\_\_\_ DATE \_\_\_\_\_

BUS LIC. NUMBER \_\_\_\_\_ FIRE \_\_\_\_\_ DATE \_\_\_\_\_

PLANNING \_\_\_\_\_ DATE \_\_\_\_\_ EMWD \_\_\_\_\_ DATE \_\_\_\_\_

ENGINEERING \_\_\_\_\_ DATE \_\_\_\_\_ BUILDING \_\_\_\_\_ DATE \_\_\_\_\_

**ENGINEERING INSPECTION (INCLUDE VERIFICATION OF BMP's BUILT PER PLANS/WQMP)**

REF WQ/SW # \_\_\_\_\_ APPROVED BY \_\_\_\_\_ DATE \_\_\_\_\_