



**APPLICATION FOR A CERTIFICATE OF OCCUPANCY
FOR EXISTING BUILDINGS**

*** Payment accepted by check or money order ***

Instructions: Please use ink and circle, check mark or write all requested data.

I Name of Business _____ Phone _____
 Address of Business _____ City _____ State _____ Zip _____
 Applicant/Tenant Name _____ Phone _____
 Address _____ City _____ State _____ Zip _____
 Owner/Agent _____ Phone _____
 Address _____ City _____ State _____ Zip _____

II Describe * Existing Use or Type of Occupancy. _____

 Describe * Proposed Use or Type of Occupancy. _____

*** NOTE: If Use is a Daycare or Personal Care list number of children or occupants.**

III I hereby certify, that to the best of my knowledge, I have answered all of the above Questions truly and correctly. I also understand that a Certificate of Occupancy is required before any building or structure can be occupied or re-occupied by an owner or tenant.

Signature of Applicant

Date

Department Use Only
Fee \$50.00

Sq. Ft. of Occupied Area _____	Parking On Site _____	Off Site _____
Construction Type _____	Occupancy Type _____	Number of Stories _____
Maximum Seating _____	Zoning District _____	Refer to MPC _____
Zoning: Approval Date _____	Building Approval Date _____	Fire Approval Date _____