

# REQUEST FOR CERTIFICATE OF OCCUPANCY FOR NEW OR EXISTING COMMERCIAL/INDUSTRIAL STRUCTURES

## OWNERS INFORMATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_

CITY, STATE AND ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

## LESSEE INFORMATION:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

CITY, STATE AND ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

## BUSINESS INFORMATION:

Name of Business: \_\_\_\_\_

Address of Business: \_\_\_\_\_

Type of Business: (retail, office, restaurant, factory, etc.) \_\_\_\_\_

\_\_\_\_\_

(Applicants signature)

(Date signed)

Temporary Certificate of Occupancy Fee: \$15.00

Final Certificate of Occupancy Fee: \$10.00

Fire Chief Inspection For Existing Structures: \$45.00