



## CERTIFICATE OF OCCUPANCY

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

Usage for Business: \_\_\_\_\_

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

Contact Email: \_\_\_\_\_

Occupant: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

Building Owner: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

Property Zoning Classification (if known): \_\_\_\_\_

**Building Square Footage (REQUIRED):** \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Permit Fee: \$ \_\_\_\_\_

CASH / Check # \_\_\_\_\_

\_\_\_\_\_  
Date