



CERTIFICATE OF OCCUPANCY APPLICATION

PLEASE PRINT

COMPANY

BUSINESS NAME _____

PHYSICAL LOCATION IN WESTON _____

MAILING ADDRESS _____

PHONE _____ FAX _____

EMAIL _____ WEBSITE _____

CONTACT

CONTACT NAME _____

MAILING ADDRESS _____

PHONE _____ EMAIL _____

OWNER

PROPERTY OWNER NAME _____

MAILING ADDRESS _____

PHONE _____ EMAIL _____

Change of ownership business name Current business name _____

Total Employees _____ Maximum # of employees on duty day or night _____

Describe business/use _____

Is building equipped w/automatic fire sprinklers? Partial Full Not equipped

Will smoking be permitted inside the building? Yes No Storage over 12' in height _____ SF

Business/Property Use (Check all that apply)

<input type="checkbox"/> Retail _____ SF	<input type="checkbox"/> Service _____ SF
<input type="checkbox"/> Office _____ SF	<input type="checkbox"/> Restaurant _____ SF
<input type="checkbox"/> Warehouse _____ SF	<input type="checkbox"/> Church _____ SF
<input type="checkbox"/> Distribution _____ SF	<input type="checkbox"/> Institutional _____ SF
<input type="checkbox"/> Wholesale _____ SF	<input type="checkbox"/> Other _____ SF
<input type="checkbox"/> Manufacturing/Assembly _____ SF	Total SF _____ SF

Usage Checklist

Business Name _____

Date of Application _____

Check *all* applicable items used by your occupation or business. Attach MSDS to this form where applicable.

- Alcohol sales
- Alcoholic beverages
- Bales of loose combustible fibers
- Cellulose nitrate film
- Compressed gas
- Dry cleaning (flammable solvents)
- Dust producing process
- Explosives or ammunition
- Fireworks
- Flammable or combustible liquids (10 gallons or more only)
- Floor drains in building
- Food and/or beverage processing, storage or sales
- Food products
- Gaming devices
- High piled stock/storage (over 12' in height)
- Liquid propane gas
- Magnesium
- Other hazards Specify: _____
- Painting with flammables
- Poisonous or hazardous chemicals/acids
- Recycling waste
- Smoking
- Vehicle repair or garage
- Vehicles in building
- Welding or cutting
- Woodworking
- X-ray development

With this signature I certify that all of the information contained on this application is true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a Certificate of Occupancy (CO) does not presume to give authority to violate or cancel the provisions of any state or local law regulating construction or the performance of construction. The issuance of any CO neither exempts nor modifies any covenants, deed restrictions, City Ordinances and/or state or federal laws, whether herein specified or not.

Print Name

Signature

Date