

Previous or current use located in this specific space _____

Are any other uses located on this property: Yes _____ No: _____

* If yes please explain (i.e., commercial, residential, office etc.)

Name, Address, Telephone number, and title of principals in the business:

Name	Home Address	Home Telephone #	Cell Phone #	Title	Date of Birth

Landowner: Name _____

 Address _____

 Telephone _____

Will there be any building renovations or expansions involved in this new or continuing use of the property? Yes _____ No _____

If yes explain: _____

PLEASE BE ADVISED THAT ACCEPTANCE OF A FEE DOES NOT INSURE ISSUANCE OF A LICENSE. ALSO BE ADVISED THAT YOU MUST NOTIFY AND/OR SUBMIT PLANS TO BUILDING, FIRE AND HEALTH DEPARTMENT WHEN NECESSARY BEFORE OCCUPYING OR RE-OCCUPYING PREMISES.

THIS FORM MUST BE SIGNED BY AN AUTHORIZED AGENT OF THE APPLICANT BEFORE PROCESSING.

I/We, the applicant(s) in the above entitled matter, certify that the information is true and accurate to the best of my/our knowledge.

Signature of applicant

Signature of landowner