APPLICATION FOR CERTIFICATE OF USE AND OCCUPANCY

This must be completed by any NEW Business

Location (Exac	ct Street <i>F</i>	laaress)		Business Nam	e
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Proposed Use (Use Back if necessary			1	Current Use (c	or previous use if vaca
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What part of	the buildir	ng will you	How much	Is the space now vacant?	How long has it bee vacant?
occupy?		Space (Square footage)?	□Yes □No	vacant?	
					Parcel ID #:
	Applica	nt	Owner	Ш	Additional Contact
Name					
Firm Name					
Address					
City/State/Zip					
Phone					
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