



CITY OF HUTCHINS APPLICATION FOR CERTIFICATE OF OCCUPANCY

ADDRESS: _____ SUITE # _____

TENANT/BUSINESS NAME: _____

PROPERTY OWNER: _____ PHONE #: _____

STREET/CITY/STATE/ZIP: _____

CONTACT PERSON NAME AND PHONE # (24HR): _____

DETAILED DESCRIPTION OF PROPOSED BUSINESS/PROPERTY USE

AREAS: OFFICE _____ sq.ft. + RETAIL _____ sq.ft. + WAREHOUSE _____ sq.ft. + OTHER _____ sq.ft. = TOTAL _____ sq.ft.

IS THE BUILDING EQUIPPED WITH AN AUTOMATIC FIRE SPRINKLER SYSTEM? YES _____ NO _____

LIST ANY COMMODITIES SOLD, USED OR STORED ON SITE: _____

TYPE OF STORAGE: _____ Rack _____ Pallet _____ File _____ Other _____ Maximum storage height: _____ sq.ft.

LIST ANY MATERIALS DISCHARGED TO DRAINAGE SYSTEMS OR ATMOSPHERE: _____

ARE ANY HAZARDOUS OR FLAMMABLE CHEMICALS SOLD, STORED, USED OR PRODUCED ON SITE?
YES _____ NO _____ If yes, attach MSDS information and list maximum quantities.

DOES YOUR BUSINESS INVOLVE STORAGE, SALE, OR USE OF: _____ Compressed gases _____ Ammunition or
_____ Welding _____ Spray painting _____ explosives

GAS METER REQUESTED: YES _____ NO _____ ELECTRIC METER REQUESTED: YES _____ NO _____

NO. OF EXISTING ON-SITE PARKING SPACES: _____ NO. OF REQUIRED ON-SITE PARKING SPACES: _____

ANY EXISTING SIGNS: YES _____ NO _____ if yes, circle type/s: pole pylon monument ground wall

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I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO
BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS USE AND
OCCUPANCY WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING
OF A CERTIFICATE OF OCCUPANCY NEITHER AUTHORIZES THE VIOLATION OF ANY FEDERAL
OR STATE STATUE OR CITY ORDINANCE, NOR NEGATES ANY DEED RESTRICTION.

APPLICANT'S NAME (PLEASE PRINT): _____

APPLICANT'S SIGNATURE: _____ DATE: _____

APPLICANT'S HOME ADDRESS: _____

APPLICANT'S BUSINESS PHONE NO.: _____
.....
FOR CITY USE ONLY:

USE APPROVED: _____ ZONING: _____ DATE: _____

FIRE PREVENTION: _____ FIRE SPR: _____ DATE: _____

BUILDING INSPECTION: _____ OCCUPANCY GROUP: _____ DATE: _____

CONSTRUCTION TYPE: _____ ENVIRONMENTAL HEALTH: _____ DATE: _____