

**CITY OF OWASSO
APPLICATION FOR OCCUPANCY
AND ZONING CLEARANCE**

NO BUSINESS MAY BE OPENED UNTIL THE BUILDING INSPECTOR, FIRE PROTECTION OFFICER AND CITY PLANNER HAVE SIGNED THIS OCCUPANCY PERMIT AND RETURNED A SIGNED COPY TO THE APPLICANT.

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| NAME <input type="checkbox"/> OWNER <input type="checkbox"/> OCCUPANT | ADDRESS PHONE | |
| PROPOSED USE | PROPOSED OPENING DATE | |
| TYPE OF OCCUPANCY (CHECK ALL THAT APPLY) | IS THIS PROPOSED USE TEMPORARY? <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| <input type="checkbox"/> CONFORMS TO ZONING REGULATION | IF TEMPORARY, SHOW TERMINATION DATE FOR PERMITTED OCCUPANCY | |
| <input type="checkbox"/> LEGAL NON-CONFORMING <input type="checkbox"/> NEW BUILDING <input type="checkbox"/> EXISTING BUILDING <input type="checkbox"/> CHANGE OF OCCUPANCY | WILL CONSTRUCTION, REMODEL OR REPAIR BE DONE? IF YES, DESCRIBE | |
| <input type="checkbox"/> PORTION OF BUILDING – EXPLAIN | | |
| BUSINESS CLASSIFICATION (PLEASE CHECK ONE BELOW): | ALARM SYSTEM <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| <input type="checkbox"/> APARTMENT <input type="checkbox"/> HEALTHCARE <input type="checkbox"/> AUTOMOTIVE <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> BANK <input type="checkbox"/> RECREATIONAL <input type="checkbox"/> CHILDCARE <input type="checkbox"/> RESTAURANT <input type="checkbox"/> CHURCH <input type="checkbox"/> SCHOOL <input type="checkbox"/> ENTERTAINMENT <input type="checkbox"/> SERVICE <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> SHOPPING | IS A STATE OR COUNTY PERMIT OR LICENSE REQUIRED? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, ATTACH A COPY OF THE LICENSE OR PERMIT STATE SALES TAX # ISSUED BY OKLAHOMA TAX COMMISSION: | |
| For City Use Only | | |
| LIMITATIONS IMPOSED ON PROPOSED USE? <input type="checkbox"/> YES <input type="checkbox"/> NO | EXPLAIN LIMITATIONS: | |
| OCCUPANCY LOAD | PERMIT VALID TO (DATE) | |
| BUILDING INSPECTOR <input type="checkbox"/> APPROVED FOR OCCUPANCY <input type="checkbox"/> REJECTED | SIGNATURE & TITLE | DATE |
| FIRE DEPARTMENT <input type="checkbox"/> APPROVED FOR OCCUPANCY <input type="checkbox"/> REJECTED | SIGNATURE & TITLE | DATE |
| CITY PLANNER <input type="checkbox"/> APPROVED FOR OCCUPANCY <input type="checkbox"/> REJECTED | SIGNATURE & TITLE | DATE |
| OTHER DEPARTMENT, IF APPLICABLE <input type="checkbox"/> APPROVED FOR OCCUPANCY <input type="checkbox"/> REJECTED | SIGNATURE & TITLE | DATE |

YOU MUST CONTACT THE BUILDING INSPECTOR, FIRE PROTECTION OFFICER AND PLANNER FOR INSPECTIONS.

BUILDING INSPECTOR - 376-1544 INITIAL INSPECTION DATE/TIME _____

FIRE PREVENTION OFFICER - 272-5253 INITIAL INSPECTION DATE/TIME _____

CITY PLANNER - 376-1543 INITIAL INSPECTION DATE/TIME _____

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| APPLICATION TAKEN BY: DATE: | APPLICANT'S SIGNATURE DATE: |
|--------------------------------|--------------------------------|

