



CERTIFICATE OF OCCUPANCY REQUEST

CITY OF ALICE

500 E MAIN P O BOX 3229, ALICE TX 78333

PH (361) 668-7275 FAX (361)668-4385

DATE: _____

\$100.00 FEE

PERMIT NUMBER _____

ADDRESS OF OCCUPANCY _____

LOT _____ **BLOCK** _____ **SUBDIVISION** _____

NAME OF BUSINESS

NEW BUILDING YES ___ NO ___

NAME CHANGE YES ___ NO ___

NUMBER OF EMPLOYEES _____

ZONING REQUIRED YES ___ NO ___ **NEW**

NEW OCCUPANT YES ___ NO ___

BUILDING OWNER YES ___ NO ___

USE OF BUILDING: _____

NAME OF TENANT: _____

CURRENT MAILING ADDRESS: _____

CITY, STATE, ZIP _____

PHONE _____ **FAX** _____ **E-MAIL** _____

PROPERTY OWNER: _____

CURRENT MAILING ADDRESS: _____

CITY, STATE, ZIP _____

PHONE _____ **FAX** _____ **E-MAIL** _____

PLEASE ANSWER QUESTIONS ON PAGE 2

IS YOUR BUSINESS SUBJECT TO SALES TAX LAW? YES__NO__

IF YES, PROVIDE COPY OF SALES TAX CERTIFICATE

WILL THERE BE ALCOHOLIC BEVERAGE SALES? YES__NO__

IF YES, PROVIDE COPY OF ALCOHOLIC BEVERAGE PERMIT

WILL ANY SIGNS BE INSTALLED? YES__NO__

IF YES, SIGN PERMIT REQUIRED

WILL BUSINESS GENERATE ANY INDUSTRIAL WASTE DISCHARGE TO SEWER SYSTEM? YES__NO__

WILL OUTSIDE REFUSE/RECYCLING/COMPACTING CONTAINERS BE NECESSARY? YES__NO__

WILL THERE BE ANY STORAGE OR DISPLAY? YES__NO__

WILL ANY ALTERATIONS BE MADE TO THE SITE OR BUILDING? YES__NO__

IF YES, A BUILDING PERMIT WILL BE REQUIRED

IS BUILDING SPRINKLERED? YES__NO__

WILL BUSINESS STORE OR HANDLE HAZARDOUS MATERIALS OR LIQUIDS? YES__NO__

IF YES, PROVIDE LIST OF TYPES & QUANTITIES, ALONG WITH MATERIAL SAFETY DATA SHEETS

IS YOUR BUSINESS SUBJECT TO HOTEL OCCUPANCY TAX? YES__NO__

IF YES, PROVIDE A COPY OF YOUR CERTIFICATE OF OCCUPANCY FORM TO CITY OF ALICE FINANCE DEPARTMENT

IS THIS A TRANSFER OF OWNERSHIP? YES__NO__

IF YES, PROVIDE EFFECTIVE DATE OF OWNERSHIP: _____ AND

NOTIFY CITY OF ALICE FINANCE DEPARTMENT WITH NEW OWNERSHIP INFORMATION

PRINT NAME _____ SIGNATURE _____

APPROVED BY: BLDG _____ ELECTRICAL _____

CODES _____ PUBLIC WORKS PRE TREATMENT _____

FIRE MARSHALL _____