



This questionnaire is to be completed to determine eligibility for the issuance of a Certificate of Occupancy for existing buildings (structure as is with no additional work proposed).

Applicant's Name: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Project Address: \_\_\_\_\_

**Provide Business Use Information**

Previous Use: \_\_\_\_\_ Existing Use: \_\_\_\_\_ Proposed Use(s): \_\_\_\_\_

1. List Year Built: \_\_\_\_\_
2. Date Applicant occupied subject space: \_\_\_\_\_
3. Is the establishment located in a commercial center?  Yes  No  
If yes, submit a tenant list and building suite layout diagram to the Development Services Department Addressing Staff to verify address and suite number.
4. Is subject space  single story or  multi-level?
5. List square feet by floor and/or subject suite \_\_\_\_\_
6. Is there outdoor dining or outdoor alcohol consumption?  Yes  No; If yes, square feet \_\_\_\_\_
7. How many parking spaces currently exist? \_\_\_\_\_
8. How many accessible parking spaces currently exist? \_\_\_\_\_

Obtain a copy of all previous permits and/or supporting documentation from the Records Center at 200 W. Washington St, 2<sup>nd</sup> floor, and attach to the completed questionnaire and application. Submit all to the Cashier Counter along with a \$150.00 fee. You will be contacted within two weeks with the results of your review and receive further instructions. For questions, please contact Records Center Staff at 602-262-7800.

**Additional items may be required to determine eligibility for this process.**

----- **Staff Use Only** -----

**Date Received:** \_\_\_\_\_ **Initials:** \_\_\_\_\_

Zoning: \_\_\_\_\_ Allowed Use  Yes  No

Parking Approved  Yes  No Liquor Applicant  Yes  No

**Additional Procedures Needed**

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Site Plan Amendment        | <input type="checkbox"/> Dimensioned Site Layout        | <input type="checkbox"/> Proof of Year Built     |
| <input type="checkbox"/> Cross Access Agreement     | <input type="checkbox"/> Dimensioned Floor Plan Drawing | <input type="checkbox"/> Proof of Continuous Use |
| <input type="checkbox"/> Building Code Modification | <input type="checkbox"/> Life Safety Report             |  |
| <input type="checkbox"/> Other _____                |   |  |

This publication can be made available in alternate formats (Braille, large print, computer diskette, or audiotape) upon request. Contact the Development Services Department at (602) 262-7811 voice or (602) 534-5500 TTY.