



CHANGE OF USE OR OCCUPANT FORM

This form must be completed when a change of occupant or a change of use occurs in a commercial space.

1. Location Information

Location Address:	City, State, ZIP:
Applicant Name:	
Phone:	Email:
Name of Current / Past Occupant:	Name of Future (Proposed) Occupant:
Current Occupant Use:	Future (Proposed) Occupant Use:
Building Construction Type:	Zoning Classification:
Is the building currently equipped with a fire alarm system? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	
Is the building currently equipped with a fire suppression system? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	

2. Property Owner Information

Name:	
Mailing Address:	City, State, ZIP:
Phone:	Email:

3. Proposed Alteration Information

Describe any proposed alterations to the current structure or interior layout:
Describe any proposed alterations to the current site layout:
Describe the nature of the future use:

4. Instructions

Please submit the following documents along with this completed form:

- To-scale plan showing current and future interior layouts / dimensions.
- To-scale plan showing current and future site layouts / dimensions.

This form will be reviewed by the building official, zoning administrator, and fire marshal. You will be notified if further plan review, site modifications to accommodate the change in use, or permits are required.

Review is based solely on the information provided by the applicant. Further review may be required.

Inspection(s) may be required by township officials as a part of the review process.

5. Certification

By signing below, I, _____ (Print Name), certify that the information provided on this form and supporting documentation is, to the best of my knowledge, accurate and complete.

Signature

Date of Signing