



VILLAGE OF EVENDALE
BUILDING DEPARTMENT



CHANGE OF OCCUPANT/TENANT

APPLICATION FOR INSPECTION AND CERTIFICATE OF OCCUPANCY

Permit Number: _____

BUSINESS NAME: _____

BUSINESS OWNER/AGENT: _____

SUBJECT ADDRESS: _____

AREA OF OCCUPANCY (Square Feet): _____

NATURE OF OCCUPANCY: ☐ Entire Structure ☐ Multi-Tenant Space ☐ Sublease

BUSINESS ACTIVITY DESCRIPTION: _____

I certify that we are the tenants of the above described location and we hereby request an inspection of said location.

SIGNATURE: _____ DATE: _____

PHONE: _____ EMAIL: _____

Required Submittals: Fee (\$50) and Floor Plan.

FOR DEPARTMENT USE ONLY – APPROVED

USE GROUP: _____ CON. TYPE: _____ OCCUPANCY LOAD: _____ ZONING DISTRICT: _____

ZONING USE TYPE: _____

BUILDING COMMISSIONER: _____ DATE: _____

ZONING OFFICIAL: _____ DATE: _____

Copy to: _____ FIRE _____ TAX

Planning Commission/BZA Case No.: _____