



## COMMERCIAL OCCUPANCY APPLICATION

**Business**

**Name:** \_\_\_\_\_

**Business Address:** \_\_\_\_\_

\_\_\_\_\_

**Business Phone #** \_\_\_\_\_

**Business Owner's Name:** \_\_\_\_\_

**Owner's Home Address:** \_\_\_\_\_

\_\_\_\_\_

**Owner's Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Business type prior to new owner:** \_\_\_\_\_

**New business proposed use** \_\_\_\_\_

**Type of goods or services being provided:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Building Information:**

**Number of stories:** \_\_\_\_\_

**Construction type of building:** \_\_\_\_\_

**Electrical service size:** \_\_\_\_\_

**Do you own or rent building:** \_\_\_\_\_

**If rented name of Building Owner:** \_\_\_\_\_

**Building Owner's Address** \_\_\_\_\_

\_\_\_\_\_

**Date of expected opening** \_\_\_\_\_

**CITY OF ALEDO – OCCUPANCY INSPECTION REPORT**

Date:	Address:
Most Recent Use:	Proposed Use:
Building Owner:	
Occupant (if different):	

<b>Exterior</b>	
Address Number Required on front building	Junk, refuse, garbage, junk vehicles:
Exterior Walls	Roof
Fire Escape	Windows
Chimney	Parking
<b>Interior Sanitation and Safety</b>	
Fire Risk	Unsanitary Condition
<b>Electrical:</b>	
GFCI Receptacles	Electrical Wiring
Electrical Service Panel	Misc Electrical
<b>Life Safety</b>	
Exit Lights	Hard Wired Smoke Detectors
Fire Alarm System	Exits
Open Insulation	Handrails
Emergency Lights	Fire Extinguisher
<b>HVAC</b>	
Restroom Ventilation	Outdoor Air
HVAC Ventilation	Furnace
Boiler Condition	State Boiler Inspection Required
<b>Plumbing</b>	
Plumbing Cross Connection	Hot & Cold Water Supply
Plumbing Fixtures	Plumbing Supply Properly Vented
Hot Water Tank	General Plumbing
<b>Other</b>	
Structural	Elevator

