



Change of Occupancy / Use Application

Change in Occupancy/Use: _____ to _____
(Former use/business) (New use/business)

Business Location: _____
(Mailing address and zip code) (Plaza name and address, if applicable)

Business Name: _____
(Business name) (Legal business name, if different)

Zoning District: _____

Business Owner Contact: _____
(Business Owner Name, Street Address, City, State, Zip Code)

(Phone) (E-mail)

Property Owner Contact: _____
(if different) (Property Owner Name Street Address, City, State, Zip Code)

(Phone) (E-mail)

Description of new occupancy/use:

Proposed days/hours of operation:

(Please answer all of the following questions.)

Yes No

Is the proposed use/business permitted within the zoning district?

Is a permit for construction required? (If yes, a separate building permit application and fee(s) must be submitted to the Building Dept.)

Does the proposed business/use require any town, county, state or federal license(s) to operate? (If yes, Town requires a copy of license and signed Affidavit of Compliance and Good Standing.)

Applicant Name (Print)

Applicant Signature

Date

Required With Application

- _____ Copy of site plan/survey instrument
- _____ Scaled floor plan(s), labeled with use(s) of space
- _____ Lease or written permission if not property owner

Office Use Only
Approved by: _____
Date: _____