



CERTIFICATE OF OCCUPANCY

Application Form

(Reference: Code of Ordinances §156.157, as Amended)

Business Information *(Business requesting the Certificate of Occupancy)*

NAME OF BUSINESS:			
STATE SALES & USE TAX PERMIT NUMBER:	(ATTACH COPY OF PERMIT)		
TYPE OF BUSINESS:			
BUSINESS/PROFESSIONAL LICENSE #: (ATTACH COPY)			
STREET ADDRESS:		SUITE NO.	
BUSINESS OWNER'S NAME:		BUSINESS OWNERS DRIVERS LICENSE #:	
BUSINESS TELEPHONE:		Emergency Telephone	

Zoning District		Square Footage of Building Used by This Business:	
Number of Parking Spaces		Are these shared with other businesses?	
Occupant Load			
Normal Days and Hours of Operation:			

Building Information *(Property where business is located)*

Name of Building Owner:			
Building Owner's Address:			
Business Telephone:		Emergency Telephone ⁽¹⁾:	

Note 1: The Police and Fire Departments require a telephone number where the business and/or Property owners may be reached in the event an emergency occurs during non-business hours.

The Certificate of Occupancy issued by the City of Gun Barrel City verifies that the premises are in compliance with the city's building and fire codes as of the date issued. It is not intended, and should not be construed as, an endorsement by the City of Gun Barrel City of the business being operated. The fee for the Certificate of Occupancy is \$120.00. Any change in ownership, business name, tenant or use of premises requires a new Certificate of Occupancy. The Certificate of Occupancy should be displayed in a prominent location that is visible to the public at all times.

Applicant's Signature

Date of Application



**GUN BARREL CITY
POLICE DEPARTMENT**
Emergency Contact List

**CERTIFICATE OF OCCUPANCY
BUSINESS CONTACT INFORMATION SHEET**

This form is part 2 of a two part Certificate of Occupancy Form required to be issued to each business operating in the City of Gun Barrel City. In order to allow the Gun Barrel City Police Department a more efficient response to alarms and to notify business owners in the event of an emergency during non-business hours, we ask that you complete this questionnaire and return it to Gun Barrel City Hall with your completed Certificate of Occupancy Form. A copy will then be provided to the Gun Barrel City Police Department for reference and retention. Your cooperation is greatly appreciated.

Personal descriptions are requested for identification purposes.

Business Name:
Business Address:
Business Phones:

Primary Contact

Contact Person:
Phone Number:
Title:
Height:_____ Weight:_____ Hair Color:_____ Eye Color:_____ DL#:_____

Secondary Contact

Contact Person:
Phone Number:
Title:
Height:_____ Weight:_____ Hair Color:_____ Eye Color:_____ DL#:_____

Additional Contact

Contact Person:
Phone Number:
Title:
Height:_____ Weight:_____ Hair Color:_____ Eye Color:_____ DL#:_____

Thank you for your cooperation. We want to better protect and serve you and your business.