Application for Certificate of Occupancy

INSTRUCTIONS: Please fill out this form and mail or bring it by the above address with all supporting documents.
(ALL INFORMATION MUST BE PRINTED AND COMPLETE)

☐ Commercial ☐ Residential **Type of Construction:** ☐ New ☐ Remodel ☐ Addition

BUSINESS INFORMATION:

Business Name: _____

Physical Address: _____ City: _____ State: _____ Zip: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone #: _____ Fax : _____ E-Mail: _____

OWNER OF LOCATION OR TENANT NAME IF DIFFERENT:

Name: _____

Address: _____

City : _____ State : _____ Zip : _____

Phone # : _____ Fax : _____ E-Mail: _____

OCCUPANCY:

☐ Occupy Land Only ☐ Occupy Existing Structure ☐ Occupy New Structure ☐ Occupy Non-Conforming Structure

BUILDING TO BE USED FOR: _____

I / We, understand that should the above land or premises be used or occupied in violation of the Zoning Ordinances, and/or Building Code, Fire, Sanitary, or Health Laws or Ordinances of the City of Hillsboro, that I / We, shall be subject to penalty in accordance with the provisions of the Zoning Ordinances or other applicable regulations.

_____ _____
Owner or Lessee Date

If you plan on operating an establishment that serves any type of food you are required to have a Health Certificate. Please attach a copy of your Health Certificate.

****STAFF USE ONLY - PLEASE DO NOT WRITE BELOW THIS LINE****

LEGAL DESCRIPTION:

Addition or Abstract: _____ Block : _____ Lot: _____

ZONING:

Current Zoning District: _____ Occupancy Classification: _____

Group: ☐ A1 ☐ A2 ☐ B ☐ E ☐ F ☐ H ☐ IR ☐ M ☐ R ☐ S

☐ Other: _____

Construction Type: ☐ I ☐ II ☐ III ☐ IV ☐ V