



# Village of Walton Hills Building Department

Kevin Hurst – Mayor / Safety Director

Jim Ziegler  
Chief Building Official

## APPLICATION FOR COMMERCIAL OCCUPANCY PERMIT

Permit # \_\_\_\_\_

Fee: \$100.00

**Property Owner:**

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

Address: (include street no. & suite no.) \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

Federal Identification No.: \_\_\_\_\_ (Or Soc. Sec. No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_)

\*\*\*\*\*  
**Business Occupant:**

Business Name: \_\_\_\_\_

Business Owner Name: \_\_\_\_\_

Business Address (include suite no.): \_\_\_\_\_

Business Phone: (\_\_\_\_) \_\_\_\_\_

Federal Identification No.: \_\_\_\_\_ (Or Soc. Sec. No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_)  
(This information is necessary for tax purposes)

Proposed usage and hours of operation: \_\_\_\_\_

Number of employees (including owner or manager): \_\_\_\_\_

Estimate of peak number of users (e.g. visitors & customers) and of time when peak would usually take place:  
\_\_\_\_\_

Please include the following:

- A floor plan showing the location of furniture and merchandise
- A sketch showing number and placement of parking spaces to be made available to prospective occupant

Reason for change of occupancy (check block and initial):

Sale: \_\_\_\_\_  Lease: \_\_\_\_\_  Rental: \_\_\_\_\_  Change of Use: \_\_\_\_\_

Date that Board of Zoning Appeals approved (if applicable): \_\_\_\_\_

**Pursuant to Walton Hills Ordinance Section 1442.02 this building may not be occupied until the occupancy is approved.**

X \_\_\_\_\_  
Print name

\_\_\_\_\_  
Date

X \_\_\_\_\_  
Signature