

**Application for Certificate of Occupancy/Change of Use**

\*Fee: \$100.00

office use only: \_\_\_\_\_ date: \_\_\_\_\_  
Group: \_\_\_\_\_ Type: \_\_\_\_\_  
Sign appl (separate appl/fee): \_\_\_\_\_

1) Name of Applicant: \_\_\_\_\_ Phone: \_\_\_\_\_

Building Site Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

2) Contractor/Agent: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

3) Owner of Property/Structure: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

4) Legal Description: Subdivision: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

5) What is the lot size? \_\_\_\_\_ Acres or Square Feet

6) In which zoning district is the property? \_\_\_\_\_

7) Type of Business Proposed: \_\_\_\_\_

8) Previous Business/Use Located in Structure: \_\_\_\_\_

9) Total Square Footage: \_\_\_\_\_ 10) Number of Stories \_\_\_\_\_

11) Type of Construction (Structural & Exterior Walls): \_\_\_\_\_

12) Attach two (2) detailed site plans for the project that shows all of the following:

- a. Scale: The preferred scale is 1 inch to 20 feet.
- b. North Arrow.
- c. Lot boundaries with dimensions noted.
- d. Location of all existing and proposed roads and driveways.
- e. Interior floor plan including all rooms, halls, doorways with dimensions noted.
- f. Show distance of all existing and proposed structures to property boundaries (property pins must be evident or a survey retracement completed).
- g. Letter each existing structure and identify below:  
A. \_\_\_\_\_ B. \_\_\_\_\_  
C. \_\_\_\_\_ D. \_\_\_\_\_
- h. Number each proposed structure and identify below:  
1. \_\_\_\_\_ 2. \_\_\_\_\_  
3. \_\_\_\_\_ 4. \_\_\_\_\_

13) I, \_\_\_\_\_, Hereby depose and say that all of the above statements and the statements contained in the documents hereto attached are true and correct to the best of my knowledge and belief. Furthermore, I hereby grant permission to the members of the Polson Building Department, Fire Department, or their designated agents to enter onto the subject property for the purpose of evaluating this application and any construction which has or will occur as a result of this application.

Landowner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Tenant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*Incomplete or erroneous applications will be returned to the applicant.

Rev 01/11