

**APPLICATION FOR OCCUPANCY AND USE PERMIT**

ADDRESS OF OCCUPANCY		
NEW OWNER(S) OF BUILDING	ADDRESS OF OWNER(S)	TELEPHONE
TENANTS' NAME	TENANTS' ADDRESS	TELEPHONE
EFFECTIVE DATE OF OCCUPANCY	TYPE OF OCCUPANCY AND USE	

IF COMMERCIAL, HOW MANY EMPLOYEES? \_\_\_\_\_

PLEASE INDICATE DAYS AND HOURS OF OPERATION: \_\_\_\_\_

DO YOU WISH TO HAVE THE BUILDING INSPECTION DEPARTMENT INSPECT YOUR RESIDENCE FOR ANY HEALTH, SAFETY OR APPLICABLE CODE VIOLATIONS? **YES [ ] NO [ ]**

IF YES, AN APPLICATION FOR CODE COMPLIANCE AND AN INSPECTION FEE OF \$40.00 MUST BE REMITTED TO THE INSPECTION DEPARTMENT.

STORAGE OF HAZARDOUS AND/OR FLAMMABLE CONTENTS: **YES [ ] NO [ ]** IF YES, DESCRIBE:

PLEASE LIST NAME, ADDRESS AND TELEPHONE DATA OF THREE PERSONS WHO CAN BE CONTACTED BY THE POLICE AND FIRE DEPARTMENT IN CASE OF EMERGENCY:

1. NAME	ADDRESS	TELEPHONE
2. NAME	ADDRESS	TELEPHONE
3. NAME	ADDRESS	TELEPHONE

DO YOU HAVE AN ALARM SYSTEM: **YES [ ] NO [ ]** IF YES THEN NAME THE ALARM CO.

TELEPHONE

The Applicant certifies that all of the information herein submitted is accurate and that a permit granted shall create no legal liability, expressed or implied, on the Department of Development Services of the Town of Brookfield. Any changes in the above information must be reported to the Town of Brookfield Town Clerk or Building Inspector.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**PERMIT FEES:** RESIDENTIAL - \$35.00 COMMERCIAL - \$90.00

**DEPARTMENT USE ONLY**

TAX KEY NUMBER	OCCUPANCY PERMIT NUMBER	PERMIT DATE
PERMIT FEE PAID	PERMIT RECEIPT NUMBER	CODE COMPLIANCE REPORT NUMBER