



TOWN OF SPRINGERVILLE

"GATEWAY TO THE WHITE MOUNTAINS"

CERTIFICATE OF OCCUPANCY APPLICATION

Name of Business

New Business Address

Previous Business Address

Date of move

Name of Applicant(s)

Mailing Address

Telephone Number

Zoning Classification

Name of Property Owner(s) [if different]

Mailing Address

Telephone Number

Nature of Business

Type of business: Corp ___ Partnership ___
Restaurant ___ Sole Proprietor ___ Retail ___
Gas Station/Auto Repair ___ Other ___

Current Town of Springerville Business License #

INSPECTED BY:

BUILDING INSPECTOR:

Discrepancies: Yes ___ No ___

Signature _____ Date _____

FIRE/CO INSPECTOR:

Discrepancies: Yes ___ No ___

Signature _____ Date _____

Date Stamp:

Fee: \$ _____ Received By: _____ Approved: Y ___ N ___

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