

Fee **\$150.00** Folio #13- \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Zoning District \_\_\_\_\_ Date \_\_\_\_\_

**CONCORD TOWNSHIP DEPARTMENT OF CODE ENFORCEMENT**  
**APPLICATION FOR CERTIFICATE OF OCCUPANCY**

ADDRESS OF PROPOSED USE \_\_\_\_\_

OWNER OF BUILDING OR PROPERTY \_\_\_\_\_

OWNER'S HOME ADDRESS \_\_\_\_\_ TELEPHONE \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TENANT (IF APPLIES) \_\_\_\_\_ HOME TELEPHONE \_\_\_\_\_

TENANT'S HOME ADDRESS \_\_\_\_\_ BUSINESS TELEPHONE \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TYPE OF BUSINESS \_\_\_\_\_ TRADE NAME \_\_\_\_\_

IF THE BUSINESS IS A SIT DOWN RESTAURANT, WHAT IS THE TOTAL SEATING CAPACITY? \_\_\_\_\_

WILL YOU BE USING A BASEMENT AREA? YES [ ] NO [ ] IF YES, ANSWER THE FOLLOWING  
WHAT IS THE FLOOR AREA (SQUARE FEET) \_\_\_\_\_ NUMBER OF EXITS \_\_\_\_\_  
ARE THERE LIGHTED EXIT SIGNS YES [ ] NO [ ] NO. OF BATHROOMS \_\_\_\_\_  
IS THERE EMERGENCY LIGHTING YES [ ] NO [ ]

WILL YOU BE USING A FIRST FLOOR AREA? YES [ ] NO [ ] IF YES, ANSWER THE FOLLOWING  
WHAT IS THE FLOOR AREA (SQUARE FEET) \_\_\_\_\_ NUMBER OF EXITS \_\_\_\_\_  
ARE THERE LIGHTED EXIT SIGNS YES [ ] NO [ ] NO. OF BATHROOMS \_\_\_\_\_  
IS THERE EMERGENCY LIGHTING YES [ ] NO [ ]

WILL YOU BE USING A SECOND FLOOR AREA? YES [ ] NO [ ] IF YES, ANSWER THE FOLLOWING  
WHAT IS THE FLOOR AREA (SQUARE FEET) \_\_\_\_\_ NUMBER OF EXITS \_\_\_\_\_  
ARE THERE LIGHTED EXIT SIGNS YES [ ] NO [ ] NO. OF BATHROOMS \_\_\_\_\_  
IS THERE EMERGENCY LIGHTING YES [ ] NO [ ]

WILL YOU BE USING ANY OTHER AREA? YES [ ] NO [ ] IF YES, ANSWER THE FOLLOWING  
WHAT IS THE FLOOR AREA (SQUARE FEET) \_\_\_\_\_ NUMBER OF EXITS \_\_\_\_\_  
ARE THERE LIGHTED EXIT SIGNS YES [ ] NO [ ] NO. OF BATHROOMS \_\_\_\_\_  
IS THERE EMERGENCY LIGHTING YES [ ] NO [ ]

IS THE BUILDING (INCLUDING THE BASEMENT) PROTECTED WITH FIRE RATED MATERIAL? YES [ ] NO [ ]

IS THE BUILDING SPRINKLERED? YES [ ] NO [ ]  
HOW MANY EMPLOYEES WILL BE ON THE PREMISES? \_\_\_\_\_

WILL ANY EXISTING SIGNS BE CHANGED? YES [ ] NO [ ] ANY NEW SIGNS ERECTED? YES [ ] NO [ ]  
**(A SEPARATE PERMIT IS REQUIRED FOR CHANGES TO EXISTING SIGNS OR INSTALLATION OF NEW SIGNS)**

IF YES, TYPE OF SIGN \_\_\_\_\_

\_\_\_\_\_  
NAME OF APPLICANT (PLEASE PRINT)

\_\_\_\_\_  
SIGNATURE OF APPLICANT

BCO \_\_\_\_\_ FIRE MARSHAL \_\_\_\_\_ TWP ENGINEER \_\_\_\_\_