CITY OF Painesville

Community Development Department
7 Richmond Street, Painesville, OH 44077
Phone (440) 392-5931 Fax (440) 392-0981

CERTIFICATE OF COMPLIANCE - BUSINESS OCCUPANCY

Fee: $75.00

1145.05 APPLICATION FOR AND ISSUANCE OF CERTIFICATE OF COMPLIANCE.

Nonresidential Occupancy: Application for a Certificate of Compliance for the occupancy or establishment of a use in a nonresidential existing building or structure shall be made prior to the occupying of the building or structure. If the use is in conformity with the provisions of this ordinances, the Building Code, the Fire code and all other applicable ordinances the Certificate of Compliance shall be issued. Excavations or site improvements shall not be started, or buildings or structures shall not be erected, moved, constructed, reconstructed, enlarged, or structurally altered until a **Certificate of Zoning Compliance** (SEPARATE FORM) has been applied for and issued by the Building Official and Zoning Administrator.

Land or a building which has been erected or altered shall not be occupied or used until a Certificate of Occupancy has been applied for and issued by the Building Official and Zoning Administrator. ***Please note:** all applications are subject to Zoning Review before issuance. The use of the structure may be denied after review of all zoning ordinances. The **$75.00 fee is nonrefundable**.

- Do not occupy (open for business) until all required certificates have been issued.
- Do not display banners, window signs or temporary signage without a permit.
- Do not make alterations, additions or improvements prior to obtaining required plan approvals.

1.	**Property Information: (check one)**	☐ Commercial Use	☐ Industrial Use (*use other form*)	☐ Mixed Use
2.	Address:		Suite/Sub Lot:	
3.	Parcel #:		Zoning District:	
4.	Current or Previous Use:			
5.	Proposed Use (give detailed description):			

6.	**Property Owner Information:**			
Name:				
Address:	City:		State:	Zip:
Business Phone		FAX:		
Email:		**Owner Signature:**		

7.	**Applicant Information: (if other than owner)**			
Name:				
Business or Tenant Name:				
Address:	City:		State:	Zip:
Business Phone		FAX:		
Email:		**Applicant Signature:**		

8.	**Authorizing Signature: "I certify that all of the above information and all statements, information and exhibits that I am submitting in conjunction with this application are true and accurate to the best of my knowledge."**
Print Name:	
Signature:	**Date:**

Please check any/all that apply to your type of business.

Commercial:
- ☐ Finance, Insurance and Real Estate
- ☐ Retail Trade
- ☐ Services (i.e. personal, auto repair, health)

Industrial:
- ☐ Agricultural services, forestry, fishing
- ☐ Construction
- ☐ Manufacturing
- ☐ Mining
- ☐ Wholesale Trade
- ☐ Transportation & Public Utilities

Please describe in detail what type of business this is.

_____

_____

Is this a new business? Yes ☐ No ☐ ☐ New Ownership ☐ Relocation

If so, from where: _____

Is there a security system present? ☐ Yes ☐ No

Expected install date? _____

Is this alarm: ☐ monitored or ☐ local alarm only?

Total Square Footage of tenant space: _____ sq. ft.

FOR OFFICE USE ONLY:

Date submitted	Approval Type Required	Date Approved	Approval By
	Zoning Compliance		
	Design Review District		
	Building Final Inspection		
	Electrical Final Inspection		
	Mechanical Final Inspection		
	Plumbing Final Inspection		
	Sewer Final Inspection		
	Fire Dept. Final Inspection		
	Certificate of Zoning Compliance		
	Certificate of Occupancy		

Route a copy of the completed form to:
Econ. Dev___ Electric___ Fire___ Police___ Utilities___ Water___ WPCP___ Date Forwarded_____