

Application for Change of Use or Occupancy Permit

Applicant Name:			Phone Number:		
Applicant Address:					
	plicant Email:				
Sit	e Address:				
Oc	ccupant/Business Name:				
Pro	operty Owner:	Pho	one Number: _		
			City: State: Zip:		
Bu	siness Contact:	Ph	one Number: _		
Со	ntact Email:				
Exi	isting Type of Property: 🗌 Reside	ential Non-Residential	Zoning Classi	fication:	
Exi	isting Use/Occupancy Type:	Proposed L	Jse/Occupancy	Туре:	
Bu	ilding Code Used For Changes:	2018 NC Building Code	2018 NC Exis	ting Building Code	
De	escription of Proposed Work/Busin	ness Include Hours of Opera	ation:		
	iilding Total Square Footage: ease Read carefully:		: Area Per	Floor:	
1)	Copy of the executed lease agreement.				
2) 3) 4)	scale with all exits marked. The drawing <u>must</u> include life safety devices to include exit signs, fire extinguishers, exit paths, etc.				
Pro	operty Owner Signature:		Da	ite:	
Applicant Signature:			Date:		
Inspector Signature:					
	e Marshal:				
70	ning Administrator		Da	te.	

"The City of Dunn is an Equal Opportunity Provider and Employer"