



CERTIFICATE OF OCCUPANCY FOR EXISTING STRUCTURE REQUEST FORM

CITY OF WAYNESBORO, BUILDING & ZONING DEPARTMENT

A.) SITE INFORMATION:

- Residential (\$50.00)
- Commercial (\$75.00)
- Industrial (\$75.00)

Physical Address: _____ (Printed) Zoning District: _____

Property Owner of Record: _____ (Printed) Phone #: _____

Owner's Mailing Address (if different): _____ (Printed)

Current Use of Structure: _____ Number of occupants: _____

Proposed Use of Structure: _____ Number of occupants: _____

B.) APPLICANT INFORMATION:

Property Owner of Record: _____ (Printed)

Address: _____ (Street Address) _____ (City, State, Zip)

Email Address: _____ Phone #: _____

*Applicant Name: _____ (Printed)

Address: _____ (Street Address) _____ (City, State, Zip)

Email Address: _____ Phone #: _____

** If applicant is not property owner of record, the Power of Attorney Form is required.*

C.) STRUCTURE INFORMATION: (A detailed floor plan with room labels and dimensions is required)

- Type of Construction:
- Wood Frame
 - Concrete Floors
 - Vinyl Siding
 - Fire Proof
 - Steel Frame
 - Reinforced Concrete
 - Brick Veneer
 - Basement
 - Block
 - Engineered Joist
 - Metal Siding
 - Crawl Space
 - Piers
 - Slab
 - Other: _____

- Type of Heating Fuel:
- Natural Gas
 - Propane Gas
 - Oil
 - Electric Heat
 - Gas Logs
 - Gas Fireplace Insert
 - Heat Pump

Air Conditioning: Yes No

Water Supply: Public Private (well)

Sewage Disposal: Public Private (septic system)

Number of bedrooms: _____ Number of bathrooms: _____

D.) GENERAL INFORMATION: (Detailed description/daily operation of proposed use)

State Licensing Agency: _____

Contact Person(s): _____

Address: _____

Phone Number: _____ Fax Number: _____

Email Address: _____

E.) SIGNATURE:

AFFIDAVIT: The undersigned property owner, or *duly authorized tenant/lessee [check one] certifies that the foregoing information is true and correct to the best of my knowledge and belief; with the understanding that any incorrect information submitted may result in the denial or delay of this request. I hereby authorize the City of Waynesboro to review this request, visit the property and enter the premises during normal business hours for the purpose of conducting a property maintenance inspection. I understand that upon completion of the inspection, permits may be required to correct any code violations observed.

Signature

Date

** If applicant is not property owner of record, the Power of Attorney Form is required.*

FOR OFFICE USE ONLY:

Date Received: _____

Permit #: _____ Fee Paid: _____

Approved by: _____ Date: _____
(Building Official/Zoning Administrator)

Comments: _____

