

BUSINESS OCCUPANCY PERMIT APPLICATION



Zoning Administration
 2424 15th Ave
 South Milwaukee WI 53172
 414-762-2222 x135
elang@smwi.org

OFFICE ONLY

Permit # _____
 TKN# _____
 Fee \$100 or \$30 if <300 SqFt
 Online payments available upon request

| | |
|---|--|
| Business Name/DBA: | Business Legal/Financial Name (LLC, INC) |
| Business Address: | Expected Opening Date: |
| Address business mail will be delivered to: | |
| Describe business type, services, offerings. Use separate sheet if necessary. | |
| BUSINESS OWNER PERSONAL INFORMATION | PROPERTY OWNER INFORMATION |
| Name (not Legal Financial): | Name: |
| Home Mailing Address: | Mailing Address: |
| Personal Phone: | Phone: |
| Personal Email: | Email: |
| Work Email: | Property Manager contacts: |
| Fed ID or EIN No: | |
| BUSINESS MANAGER (If business owner not involved in operations) | |
| Name | |
| Email | Phone |
| BUSINESS INFORMATION | |
| Location of Occupied space (i.e. 1 st floor) | Hours of Operation: |
| Sq. Feet of Occupied Space: | Number of employees: |
| No. of Off-Street Parking Stalls: | Estimated Number of Customers Daily: |
| Refuse collection location: | On-Site Delivery Location/Frequency: |
| APPLICATION PROCESS | |
| 1. Submit the Business Occupancy Application | |
| 2. Submit a Floor Plan to scale with dimensions, showing all walls and permanently attached items, such as, built-in counters or coolers. | |

3. **After** the permit is paid and issued, the **applicant receives an email instructing to call** for required inspections. A business **may not open** until required inspections by the Fire Inspector, Building Inspector and Environmental Health Specialist are completed and approved.

A Certificate of Occupancy will be issued once inspections are completed and all code-related requirements are met.

A separate sign permit is required for all new exterior signage or alterations to existing signs.
No commercial alteration or signage is authorized by this application.

Any change in use, owner, or occupancy type requires a new Certificate of Occupancy.

Signature of Business Owner

Date

OFFICE ONLY

Zoning: _____ Use is: Permitted Conditional

Previous use: _____

Review: _____