

OCCUPANCY PERMIT APPLICATION

Applicant Information (please print)

Name:		Email Address:	
Phone:	Phone:		
Current address:			
City:	State:	ZIP Code:	

Permit Structure Information (Please check one box below)

Address:		Date of Occupancy:	
Direct Sale	Rental	Lease or combination	
Land Contract	Other	Parcel	

Prospective Purchaser or Tenant

Name:			
Address:			
City:	State:	ZIP Code:	Phone:
E-mail:			

Agency Providing Inspection (Other than City of Conneaut)

Name:			
Address:			
City:	State:	ZIP Code:	
Phone:	Email:		
Date of inspection: (must submit copy)			

CITY USE

Inspection Date: (initial inspection)	
Repairs Needed:	
Reinspection Date:	
Amendment/change Date:	
Date Permit Issued:	Amount Paid:
Signature of applicant:	
Date:	
Signature of Inspector:	
Date:	