

CITY OF SIDNEY

www.sidneyoh.com USE COMPLIANCE CERTIFICATION

Business Name (DBA)	
Facility (Site) Address	
Mailing Address (if different)	
Contact PersonF	Phone E-mail:
FEIN (Federal Employer Identification Number)	
Property Owner (if different than Business)	
Leasing Agent / Property Manager	Phone
Previous Business Name and Use at this address	
Business Operation Information Are you relocating within the City?	Building Information No Does this business occupy the entire building?
*Please request "Occupancy and Use Classification" document if you are Describe IN DETAIL the type of business, including its	e unsure of your use group function, special equipment, materials and processes, etc:
*Will you be installing or changing signs?	No Typical time of operation: open at close at No How many shifts (typical)?
Existing Fire Protection System Sprinklers:	*What is your Standard Industrial Classification (SIC) Code? * If industrial, a Data Disclosure Form is required Do you produce / manufacture a product?

Applicant Certification

Application is hereby made for a USE COMPLIANCE CERTIFICATION for occupancy of a commercial or industrial property. All activities shall be completed in accordance with the requirements of all city, state, and federal regulations. Furthermore, the undersigned attests that no easement, covenant or deed restriction exists which legally prevents occupancy.

I HEREBY CERTIFY THAT THE ABOVE INFORMATION AND ATTACHMENTS ARE ACCURATE TO THE BEST OF MY KNOWLEDGE. I ALSO ACKNOWLEDGE THAT PROVIDING INNACURATE INFORMATION ON THIS APPLICATION OR ATTACHMENTS MAY INVALIDATE THE APPLICATION OR SUBSEQUENTLY APPROVED CERTIFICATION.

Signature	Date						
Contact Person (for this ap	plication)		Phone				
itle	eE-mail						
nly and does not constitut	te a complete review and ap	proval of the		from City staff will inclu	ude "red flag" issue		
usiness website (optional)						
Dallas Davis (Fire) 937- Jon Crusey (Public Worl Jacob Lyons (GIS) 937- Lesley Schweitzer (Incompanie)	7-498-8166; thurysz@sidney 498-8186; ddavis@sidneyoh ks/Utilities) 937-498-8141; jc 498-8744; jlyons@sidneyoh. me Tax) 937-498-8707; lschround Utilities) 937-498-8152	.com rusey@sidn com weitzer@sid	neyoh.com				
			Office Use Only				
Application Number:	Date Submitte	d:	Fee Paid (\$10.00)	Receipt #:			
Zoning District:	Section Reference:		Backflow Certificate attached:				
APPROVALS:							
COMMUNITY DEV DEI	PT	Date	GIS DEPT:	Initials			
FIRE DEPT:			— PUBLIC WORKS DEPT:		Date		
UTILITIES DEPT:	Initials	Date	— PUBLIC WORKS DEPT:	Initials	Date		
OTILITIES DEFT.	Initials	Date	_				
PERMIT #	DATE APPROVED:						
DISTRIBUTION LIST: Revenue Collections – C Fire Dept – Deputy Chie Police Dept – Chief			911 Dispatch Center Public Works - Director				