



Department of Building, Zoning & Housing
26789 Highland Road
Richmond Heights, Ohio 44143-1429
216-383-6312 Fax: 216-383-6319
richmondheightsohio.org

APPLICATION FOR PRE-OCCUPANCY INSPECTION (COMMERCIAL PROPERTY)

Date _____ Federal ID Number _____

Business Name _____ Phone _____

Site Address _____ Unit/Suite _____

Square Footage of Space to be Occupied: _____

Business Owner _____ Phone _____

Address _____ Unit/Suite _____

City _____ State _____ ZIP _____

Driver's License # _____ State _____

Emergency Contact _____ Phone _____

Building Owner _____ Phone _____

Address _____ Unit/Suite _____

City _____ State _____ ZIP _____

THE FOLLOWING FEES MAY APPLY TO THIS PERMIT:

- | | | | | |
|--------------------------|---------------------------|----------------------|----|----------|
| <input type="checkbox"/> | Inspection Fee | \$100. ⁰⁰ | or | \$ _____ |
| <input type="checkbox"/> | Certificate of Occupancy | \$25. ⁰⁰ | or | \$ _____ |
| <input type="checkbox"/> | Business Maintenance Fee* | \$50. ⁰⁰ | or | \$ _____ |

* Business Maintenance Fee is an annual charge based on square footage (\$50 minimum).

The information contained on the application is true and correct to the best of my knowledge. Any misrepresentation is grounds for denial of this permit. I understand occupancy of the space may not occur until all violations are corrected and fees are paid.

SIGNATURE OF APPLICANT

PRINTED NAME OF APPLICANT