



TENANT FIT UP

This form is for **change of use** only, with no change in floor area or coverage.

ADDRESS OF PROPERTY: _____

NAME OF COMPLEX _____

TAX MAP _____ **BLOCK** _____ **LOT** _____ **ZONING DISTRICT** _____

NAME OF TENANT'S BUSINESS: _____

PROPOSED USE OF TENANT'S SPACE: _____

AREA OF TENANT'S SPACE IN SQUARE FEET: _____ **sq. ft.**

Additional information may be necessary to determine compliance.

Any new signs or change in signage will require approval of a certificate of zoning compliance and a building permit.

The undersigned states that information submitted with this application is correct and acknowledges that any approval based on erroneous or incomplete information shall be null and void.

Tenant's Name _____
Address _____
Phone _____
E-mail _____

Property Owner _____
Address _____
Phone _____
E-mail _____

Signature _____

Signature _____

FOR OFFICE USE ONLY

Receipt Date _____

_____ Use covered by previous Site Plan/Special Exception.

_____ Site Plan/Special Exception approval required.

Phil Shook, Zoning Enforcement Officer

Date