



CITY OF SONORA OCCUPANCY PERMIT APPLICATION

Assessor's Parcel No: _____ Fee: \$30.00
Receipt No: _____

NAME OF BUSINESS: _____ PHONE: _____
ADDRESS: _____

BUSINESS OWNERS NAME: _____ PHONE: _____
ADDRESS: _____

PROPERTY OWNER'S NAME: _____ PHONE: _____
ADDRESS: _____

DESCRIPTION OF
BUSINESS: _____

ARE THERE OR WILL THERE BE ADDITIONAL BUSINESSES OPERATING AT THIS
LOCATION? YES NO

(IF YES, PLEASE PROVIDE BUSINESS DETAILS ON THE BACK OF THIS FORM)

The City requires an applicant for a business license to obtain an occupancy permit before a license can be issued. An inspection of the premises shall be required before the occupancy permit is issued. All inspections shall be by appointment only, 24 hours in advance of issuance of the occupancy permit. Contact the City of Sonora Building Department at 532-3508, to request the inspection.

An occupancy permit will be attached with the issuance of a business license for compliance with the Planning, Building and Fire Departments.

CHANGES TO THE BUILDING: YES NO
SIGNS: YES NO
STORAGE OF HAZARDOUS MATERIALS: YES NO

I certify that the above information is true and correct to the best of my knowledge.

Applicant's Signature _____ Date: _____

APPROVALS

(To be completed by City of Sonora)

PLANNING DEPARTMENT: _____ DATE: _____

REMARKS: _____

BUILDING DEPARTMENT: _____ DATE: _____

REMARKS: _____ 2ND Occupancy

FIRE DEPARTMENT: _____ DATE: _____

REMARKS: _____

ACCOUNT NUMBER: 303-04103-001

ADDITIONAL BUSINESS DETAILS:

IS THIS BUSINESS CURRENTLY OPERATING? YES NO

IF YES, PROVIDE NAME OF ADDITIONAL BUSINESS AT THIS LOCATION:

IF NO, PROVIDE BUSINESS OWNER'S CONTACT INFORMATION, A DETAILED DESCRIPTION OF THE BUSINESS AND DETAILS AS TO WHEN THIS BUSINESS WILL OPEN?
