



Commercial Infill w/o Changes Change of Occupancy Permit Application

715 W. Mt. Vernon
PO Box 395, Nixa MO 65714
725-5850 Fax 724-2381

Application Date _____ Permit # _____

PROPERTY INFORMATION

Property Address _____

Proposed Use _____ Zoning _____

OWNER / LANDLORD INFORMATION

Name _____ Phone Number _____

Mailing Address _____ City _____ State _____ Zip _____

TENANT INFORMATION

Name _____ Business Name _____

Email Address: _____

Phone _____ Cell Phone _____

Mailing Address _____ City _____ State _____ Zip _____

Do you have a City of Nixa Business License? _____ Business License #: _____

****Please NOTE: Your infill permit WILL be delayed if you have not applied for a business license.**

I hereby certify that the answers and other information on this application are true and correct and I have read and understand the above procedures and requirements as they pertain to City building regulations and by signing this form, acknowledge compliance with these rules.

Signature of Applicant: _____ Date: _____

Printed Name : _____

Please use this area for a drawing of the area you are occupying. Please include measurements.

OFFICE USE ONLY

Approved by Inspector: _____ Date: _____

Notes:

Approved by Planner: _____ Date: _____

Notes:



INFILL AGREEMENT

Date: _____

By signing this agreement the applicant agrees that the business located at _____ (address of infill) will not open for business until a Certificate of Occupancy has been issued. **Upon issuance of your permit a copy of this agreement shall be presented to the Utility Office whereupon a utility account can be established and the applicant can obtain utilities prior to receipt of a Certificate of Occupancy.** If said business opens prior to a Certificate of Occupancy, the City SHALL disconnect the utilities until the infill permit is fully satisfied. A reconnect fee for utilities will be applied before a certificate of occupancy is issued.

By signing below, I acknowledge that I have read and understood the above.

Applicant (printed name)

Applicant Signature

Building Inspector