VILLAGE OF BURR RIDGE
APPLICATION FOR
ZONING CERTIFICATE OF OCCUPANCY

_____
Date

The Village of Burr Ridge Zoning Ordinance requires the issuance of a Zoning Certificate of Occupancy prior to occupancy of any non-residential building or tenant space. Application for a Zoning Certificate of Occupancy requires the completion of this form and a ***$50.00 application fee.*** A Zoning Certificate of Occupancy certifies that the land use is permitted by the Village of Burr Ridge Zoning Ordinance but does not validate or legalize existing or future violations of the Village of Burr Ridge Municipal Code, Zoning Ordinance, or Building Codes. The Village of Burr Ridge reserves the right to enforce any and all such violations, now or in the future.

NAME OF BUSINESS:	
BUSINESS OWNER:	**BUSINESS LOCATION:**

TYPE OF BUSINESS (Please provide a detailed description of the business activities that will take place at the above address. Attach additional information as needed. Please include information pertaining to types of goods produced or sold, services provided, number and types of clients/customers, and any other pertinent information that may be relevant in describing the business or establishment. Check all applicable types of businesses listed below.):

_____

_____

Industrial:		**Commercial:**		**Office:**	
___ Manufacturing	___ Research	___ Retail Sales	___ Retail Services	___ Medical/Dental	___ Business
___ Warehouse	___ Other	___ Restaurant	___ Other	___ Professional	___ Other

This application is for (check one):	___ New Business in Village	___ Relocation within Village
	___ Expansion of Business at Same Location	___ Other

No. of Employees On Premises at Peak Occupancy: (for determining parking requirements)	Floor Area of Space to be Occupied:
Number of On-Site Parking Spaces Available:	Number of Off-Street Loading Berths:
Business Hours and Days:	Sales Tax ID No. (for retail, only):
Name of Business Previously Occupying Floor Space:	

BUSINESS CONTACT: _____ Name

Daytime No. _____ Telephone No.

_____ Address

After Hours No. _____ For Police Emergency Purposes

_____

PROPERTY OWNER: _____ Name

_____

_____ Address

Please type or print all requested information. Allow one to two weeks for processing of the application form. The applicant will be contacted upon completion of the Village's review of this application. Failure to provide all information will delay processing.