



VILLAGE OF BURR RIDGE APPLICATION FOR ZONING CERTIFICATE OF OCCUPANCY

_____ date

The Burr Ridge Zoning Ordinance requires 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 completion of this form and a **\$50.00 application fee**. A Zoning Certificate of Occupancy certifies that the land use is permitted by the Burr Ridge Zoning Ordinance but does not validate or legalize existing or future violations of the 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:	
TELEPHONE NUMBER:	BUSINESS ADDRESS: Burr Ridge, IL 60527
BUSINESS OWNER:	

TYPE OF BUSINESS (Please provide a 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: <input type="checkbox"/> Manufacturing <input type="checkbox"/> Research <input type="checkbox"/> Warehouse <input type="checkbox"/> Other	Commercial: <input type="checkbox"/> Retail Sales <input type="checkbox"/> Retail Services <input type="checkbox"/> Restaurant <input type="checkbox"/> Other	Office: <input type="checkbox"/> Medical/Dental <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Other
This application is <input type="checkbox"/> New Business in Village <input type="checkbox"/> Relocation within Village For (check one): <input type="checkbox"/> Expansion of Business at Same Location <input type="checkbox"/> 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	_____ Telephone #
_____ Address	_____ For Police Emergency Purposes

PROPERTY OWNER:

_____ Name	_____ Telephone #
_____ 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.