

CITY OF CASTLE HILLS, TEXAS
APPLICATION FOR CERTIFICATE OF OCCUPANCY

The undersigned, in accordance with provisions set out in the City of Castle Hills Code or Ordinances, hereby applies for a Certificate of Occupancy for the business shown below:

Name of Business: _____ Phone: _____

Address – include suite number (*If business is in shopping center/office building, give name of center*):

Business Owner _____
Name Address Phone

Manager's name & phone number: _____

Name, address and phone number of partner (if any):

Emergency contact: _____ Phone: _____

Alarm Company: _____ Phone: _____

Please indicate what the type of business will be and what types of sales will be handled by this location.

Taxable sales will be made: _____ Taxable sales will not be made: _____

A copy of your sales tax permit must be attached to this application. Unless your permit is attached, indicating that the business is in the City of Castle Hills, Texas your certificate of occupancy cannot be issued.

The undersigned (jointly and severally if more than one) for himself or themselves and his or their successors, assigns, heirs, and legal representatives, understand and agree that the above information is true and correct. If there are changes to management or ownership of the business, I understand that I am responsible for contacting the City's Administrative Office, in writing at 209 Lemonwood Dr., Castle Hills, TX 78213. I acknowledge that I am responsible for applying for any permits (building, electrical, plumbing, HVAC, sign, health or fire) that may be required by law.

Signature of owner/representative _____ Date: _____

TO BE COMPLETED BY INSPECTORS:

BUILDING INSPECTOR: DATE INSPECTED: _____ APPROVED/DISAPPROVED

FIRE INSPECTOR: DATE INSPECTED: _____ APPROVED/DISAPPROVED

HEALTH INSPECTOR: DATE INSPECTED: _____ APPROVED/DISAPPROVED

COMMENTS: _____

HEALTH INSPECTOR SIGNATURE: _____

To be completed by City Offices Only - PAID FEE: \$150.00 Cash / Check # _____ / Credit Date _____

Issued TEMPORARY Certificate of Occupancy # _____ Date _____
PERMANENT CERTIFICATE OF OCCUPANCY MUST BE OBTAINED UPON RELEASE OF ALL INSPECTIONS

Issued PERMANENT Certificate of Occupancy # _____ Date _____