

**STATEMENT OF OPERATIONS/DESCRIPTION OF USE
FOR CHANGE OF COMMERCIAL TENANT**

NAME: _____

HOME ADDRESS/PRESENT LOCATION: _____

PHONE NUMBER: _____

NAME OF BUSINESS: _____

TYPE OF BUSINESS: _____

BLOCK NUMBER: _____ LOT NUMBER: _____

ADDRESS OF SITE: _____

NUMBER OF EMPLOYEES, INCLUDING MGMT.: _____

SIZE OF UNIT (square feet): _____

TYPE OF SERVICE PROVIDED: _____

DAYS/HOURS OF OPERATION: _____

STORAGE OF GOODS (type, amount, location): _____

OUTDOOR DISPLAY OF GOODS FOR SALE (type, amount, location): _____

COMPANY VEHICLES (type, amount, size, GVW, location on site):

NUMBER OF SEATS (RESTAURANT): _____

WILL BUSINESS SELL PRODUCT TO ULTIMATE CONSUMER/END USER?: _____

WILL BUSINESS INCLUDE RETAIL SALES?: _____

WILL BUSINESS COLLECT SALES TAX?: _____

Name (Please Print)

Signature

Date

Note: Please include: (1) detailed proposed floor plan, (2) copy of site plan marked to show location of tenant space, (3) zoning permit application form, (4) fee, (5) this form

Revised: 12/15/11

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