

Application Number \_\_\_\_\_

**City of Wooster Development Department  
Building Standards Division**

**CERTIFICATE OF OCCUPANCY APPLICATION**

City of Wooster Municipal Building  
Building Standards Division  
538 N. Market St.  
Wooster, Ohio 44691  
330.263.5241 Fax: 330.263.5274

**INSTRUCTIONS:**

**ALL REQUIRED INFORMATION MUST ACCOMPANY THIS APPLICATION. COMPLETE THIS APPLICATION IN ITS' ENTIRETY.**

**Business Name** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Business Address:** \_\_\_\_\_

**Fax:** \_\_\_\_\_

**Owner** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Fax:** \_\_\_\_\_

**City/State/ Zip:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Applicant:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Fax:** \_\_\_\_\_

**City/State/ Zip:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**COMPLETE THE FOLLOWING IN ITS ENTIRETY:**

**Describe any outstanding orders or violations:** \_\_\_\_\_

\_\_\_\_\_

**Describe the current use and occupancy :** \_\_\_\_\_

\_\_\_\_\_

There is a plan review and miscellaneous safety and condition inspection **fee of \$80.00** that must be submitted with each application. Please **submit a floor plan** indicating the use of each area of the building (this may be an un-scaled sketch). An inspection must be scheduled to check for building code requirements and existing serious hazards.

You will be contacted to schedule this inspection.