



**APPROVED USE REQUEST FORM**

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

Specifics: \_\_\_\_\_

Applicant: Name: \_\_\_\_\_

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

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**FOR OFFICE USE ONLY:**

A search of our records indicates that the approved occupancy of the above noted property is:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Fee: \_\_\_\_\_

Receipt No. \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_