

CITY OF AMES - 304 MARTIN ST - AMES, TX 77575 - 936.336.7278

CERTIFICATE OF OCCUPANCY/TEMPORARY C/O

PERMIT FEE: \$55.00 ADDRESS AND OCCUPANT INFORMATION: Name of Business: _____ Owner/Mgr: _____ _____ City: _____ State: ____ Zip: _____ Address: _____ Fax: _____ Phone: _____ State Tax ID: _____ Driver's License: _____ Emergency Contact: Phone: IF APPLICABLE, PLEASE INCLUDE A COPY OF: T.A.B.C PERMIT, STATE HEALTH PERMIT, SSN, ADA PERMIT #. ASBESTOS SURVEY #. AND ANY OTHER APPLICABLE INFORMATION IF REQUESTED. PROPERTY OWNER/LEASING AGENCY INFORMATION: Owner/Lease Agency: _____ City: _____ State: ____ Zip: ____ Address:

ADDITIONAL INFORMATION NEEDED FROM APPLICANT:

PLEASE NOTE: ANY APPLICANT WHO HAS APPLIED FOR A NEW COMMERCIAL OR INDUSTRIAL ACCOUNT WILL HAVE TO MEET ALL THE DEVELOPMENT AND LAND USE REQUIREMENTS THAT ARE IN ORDER FOR CITY UTILITIES TO BE TURNED ON.

PLEASE ANSWER ALL QUESTIONS. IF YES, PLEASE EXPLAIN IN FURTHER DETAIL

TYPE OF OPERATION AT THIS LOCATION:
Building Square Footage:
Occupancy Projection(S): (Please Include Employees, Customers, Sale Events, Peak Times,Etc):
Will The Applicant Be Doing Any Remodeling To The Existing Site?
Will The Applicant Be Increasing The Existing Site In Any Capacity, Including Landscape, Parking, Signage, Drive Thru Window, Driveway, Etc?
Will The Site Be Changing Or Combining Its Existing Use In Anyway Now And Future (I.E. Commercial To Residential)?

TO SUBMIT FORM PLEASE EMAIL IT TO ACARRINGTON@CITYOFAMESTEXAS.COM