

Change of Use/Occupancy Permit Application

City of Mexico Beach

Property Information

Date: _____ Permit #: _____
Property Address: _____ Parcel #: _____
Lot #: _____ Block #: _____
Size of building: _____ (sq ft) Number of Floors: _____ Units: _____

Owner Information

Name: _____
Address: _____
Phone #: _____ E-Mail: _____

Occupancy Classification

Current Occupancy Classification: _____
Change to Occupancy Classification: _____
Zoning: _____

Any structure that has a change of occupancy, will be required to adapt to any and all Pertinent building and fire safety codes in relation to that change.

_____	_____
Signature of Applicant	Print Name
STATE OF FLORIDA, County of _____	
Sworn to and subscribed before me this _____ day of _____ 20 ____.	
Personally known _____ or ID _____	
Notary Signature _____	

Change of occupancy approved: YES NO Date: _____

Comments: _____

Reviewed by: _____