

City of Bexley
Building Department
2242 E. Main Street
Bexley, Ohio 43209
(614) 559-4240

Change of Occupancy/Use

Date: _____

Property address: _____ Zonig District: _____

Applicant Name: _____

Address: _____

Phone : _____ Fax: _____

E-mail: _____

Property Owner Name: _____ Phone: _____

1. Is there a current Certificate of Occupancy for the business previously located at this property address? ____ No ____ Yes (If yes, please provide a copy).

2. Write a short narrative on the **Existing Business Use** of the building or space: _____

3. Write a short narrative on the **Proposed Business Use** of the building or space: _____

4. Is the current use and the proposed use the same? Yes No

If "Yes" - Submit this form with the following information:

Certificate of zoning approval with signed consent from the property owner (This form is attached and requires you to verify with the Development Department, that the proposed business meets the requirements of the Zoning District)

A copy of the certificate of occupancy.

Site plan indicating existing parking spaces, walkways, and building exits.

Floor plan, indicating proposed furniture plan, exit signs and emergency lighting. (hand drawn if you cannot locate prints)

Signed affidavit by the owner giving consent to occupy.

5. Do you propose any alterations or additions to the existing building or space? Yes No

If yes, explain: _____

6. Do you proposed any additions or alterations to the existing mechanical systems, i.e. electric, plumbing, HVAC, egress, fire protection? Yes No

If yes, explain: _____

7. If the answer to questions 5. or 6. is yes, you will need to file a permit application. The following information is required:

Site plan to scale, indicating parking spaces.

Floor plan to scale including means of egress

Construction plans to scale with details in accordance with OBC

Electrical plans (including service location and lighting).

Fire protection systems (if applicable)

Plumbing plans (isometric) and HVAC plans

Accessibility plans

City of Bexley
 2242 East Main Street
 Bexley, OH 43209

 Development Department
 (614) 235-8694
 FAX (614) 235-3420

APPLICATION FOR CERTIFICATE OF ZONING COMPLIANCE

Property Owner's Name	Address	Daytime Phone
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Applicant's Name (if different from owner)	Address	Daytime Phone
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Address of Subject Property _____

Proposed Use (use separate sheet if necessary) _____

Attach a sketch plan showing dimensions of all existing and proposed structures, as well as parking and landscape plans, if applicable. Also show dimensions of all interior spaces to be used. The Zoning Administrator may require additional information to determine compliance with the zoning code. Upon issuance of this certificate indicating zoning approval, and prior to occupancy, the applicant must contact the Building Department to determine building requirements, if any.

I certify that the information provided with this application is correct and accurate to the best of my ability.

Property Owner's Signature

Date

Applicant's Signature (if different from owner)

Date

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Application Approved: ___ Yes ___ No

Approved by: _____
Authorized Signature

Expiration Date: ___ / ___ / ___

Date: _____

Conditions: _____

