



CERTIFICATE OF OCCUPANCY REQUEST FORM

CITY OF WAYNESBORO, PLANNING & DEVELOPMENT DEPARTMENT

A.) SITE INFORMATION:

Physical Address: _____ **Waynesboro, GA 30830**

Map/ Parcel _____ Zoning District: _____ Will your business require new signage? (circle) **Yes** **No**

Property Owner of Record: _____ Phone #: _____

Previous Use of Structure: _____ Occupant Load: _____

Proposed Use of Structure: _____ Occupant Load: _____

Business Name _____

B.) APPLICANT INFORMATION:

Applicant Name: _____

Address: _____
(Street Address) (City, State, Zip)

Email Address: _____ Phone #: _____

Applicant Signature _____ Date _____

C.) STRUCTURE INFORMATION: (A detailed floor plan with room labels and dimensions is required)

Building Materials (Brick, Wood etc.) _____

Total Building Sq. Ft. _____ Number of rooms _____ Number of bathrooms _____ Floor Plan Attached _____

Building Rental/Lease Agreement Attached _____ Electric Utility Provider: _____

Water Supply: Public _____ Private (well) _____ Sewage Disposal: Public _____ Private (septic system) _____

D.) BUSINESS INFORMATION: (Detailed description/daily operation of business)

E.) STATE LICENSE INFORMATION: (Only complete if State License is required for daily operation of business)

State Licensing Agency _____ Attach License _____

Address: _____

License Holder: _____ Preferred Method of Contact: _____

License Type: _____ Exp/Renewal Date: _____

“THE BIRD DOG CAPITAL OF THE WORLD”

• 615 Liberty Street • Waynesboro, GA 30830 • 706554-8006 Fax 706-554-8981 •

• www.waynesboroga.com •

F.) SIGNATURE:

AFFIDAVIT: The undersigned property owner, or *duly authorized tenant/lessee [check one] certifies that the foregoing information is true and correct to the best of my knowledge and belief; with the understanding that any incorrect information submitted may result in the denial or delay of this request. I hereby authorize the City of Waynesboro to review this request, visit the property and enter the premises during normal business hours for the purpose of conducting a property maintenance inspection. I understand that upon completion of the inspection, permits may be required to correct any code violations observed.

Signature Date

Printed Name Phone Number

ADDITIONAL IMPORTANT INFORMATION:

- A Business License from The City of Waynesboro will not be issued until a Certificate of Occupancy is issued for the building.
- A Food Service Permit is **REQUIRED for all Restaurants** (Issued by Burke County Health Department) (Attach FSP) _____
Contact BC Health Inspector Stephen Murray: 706.554.3456 (Food Service Permit must be issued **prior to CO Issuance**)
- Alcohol License: (Issued by The City of Waynesboro) Beer/Wine Beer/Wine Distilled Spirits
(Must serve food/operate as a restaurant in order to apply for an alcohol license) (Attach License) _____
- For more Information on our Ordinances Visit our website at: www.waynesboroga.com

FOR OFFICE USE ONLY:

Zone _____	Use _____	Historic District _____	COA _____	Other _____	Adequate Parking: _____
Fire Marshall _____	Required Number of Extinguishers _____	Required # of Exits: _____	Required to be Sprinkled? _____		
Life Safety _____	Extinguisher Tags _____	Required egress _____	Panel Box _____	Emergency Lights _____	
Exit signs: _____	Address Numbers _____	Locks _____	ADA _____	Fire System Maintained _____	
Restaurant: Food Permit _____	Grease Trap Maintained _____	Range/ Hood Vent Test _____			
New Signage _____	Sign Permit _____	Sign Regulations _____	Renovations? _____	Building Permit App _____	
City of Waynesboro Business License #: _____	Alcohol License # _____				
Date Application Received: _____					
_____ Building Official	_____ Zoning Administrator				
_____ Historic Official	_____ Fire Department				
_____ Other					