

CITY OF JASPER

Commercial Occupancy Permit Application

INCOMPLETE PERMIT APPLICATIONS WILL NOT BE ACCEPTED.

PERMIT REQUIRED TO BE POSTED ON JOBSITE (IBC SEC. 105 PERMITS (A) 105.7)

REQUIRED INFORMATION:

Building/Space Address: _____

Square Feet of Building/Space: _____

Business Name: _____

Type of Business: _____

Business Owner's Name: _____

Business Owner's Mailing Address: _____

Business Owner's Phone Number: _____

Business Owner's E-mail Address: _____

Utility Account Number: _____

Name on Utility Account: _____

Property Owner's Name: _____

Property Owner's Phone Number: _____

Signature - Must be signed by Applicant

Date

PERMIT REQUIRED TO BE POSTED ON JOBSITE (IBC SEC.105 PERMITS (A) 105.7)

Office Use Only

Permit Cost: _____

Permit Number: _____

pay. Method: _____

City Employee: _____