COMMERCIAL CERTIFICATE OF OCCUPANCY APPLICATION



City of Tupelo
Department of Development Services
P O Box 1485, Tupelo, MS 38802-1485
(662) 841-6510
permits@tupeloms.gov

Applicant Signature_____

MUNIS
Received By:
Date Received:
(for office use only)

Date:

For use ONLY when no construction, maintenance, renovations or other interior or exterior structural or lot changes are proposed. Application Fee to be paid at time of application. See current fee structure.

Please complete and provide all required attachments. Incomplete applications will be returned to the applicant. Inspections must be scheduled with the Department of Development Services prior to issue of CO.

Applicant: Name:	Phone:
Email:	Address:
Property Owner: Name:	Phone:
Email:	Address:
Business Owner: Name:	Phone:
Email:	Address:
Project Location/Address:	
Parcel number(s) of location:	
Business Name, Type	
Current Use:	Proposed Use:
Zoning District:	Use Allowed by: Right CompatibilityFlexibility
Hours of Operation:	Number of Employees: PT FT
Is commercial activity home based? Yes	Change of Ownership Business Name Change No ion Day Care Home, Small Day Care Home, Large
 Mississippi Department of Health approval, if ap Accessory Use application, if applicable Compatible Use, Flexible Use, Variance Application Additional Forms, Standards, and Documentation Entertainment Establishments, Beer and Light V see Chapter 11 of City of Tupelo Development Wine Sales, Outdoor Dining, Storage, Display, and Note: A City of Tupelo Privilege License may be acquired 	Jumber (EIN) with City of Tupelo License Designation pplicable ation, if applicable on required for Medical Cannabis Establishments, Adult Vine Sales, Truck Stops, Congregate Living Facilities, Code. Accessory Use application required for Beer &
	plication. I further understand that if I am not the property owner