



APPLICATION FOR OCCUPANCY
Community Development Department
8930 N. Government Way, Hayden, ID 83835
www.cityofhaydenid.us (208)209-2022

Please complete this form if you plan to change the use or establish a new use in a building which you own, rent, or lease. Neither the use of or the uses upon any land nor the use of or the uses within any structure shall be changed until a permit for such change of use has been issued by the Community Development Department

Date of Application: _____

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

Trade or Business Name: _____

Legal Name of Business: _____
(As registered with the State of Idaho)

Number: _____ **Fax:** _____ **Email:** _____

Type of Business: _____ **Scope of Business:** _____
(Ex: Retail, Office, etc.) (Type of goods sold, manufactured, services provided, etc.)

Area of Building to be Occupied: _____ **Approximate Sq. Ft:** _____

Number of Parking Spaces: _____ **Number of Employees:** _____

Days/Hours of Operation: _____

Anticipated work or alterations to be performed: _____

Owner/Registered Agent Name: _____ **Phone:** _____

Owner/Registered Agent Email: _____

Permanent Mailing Address: _____

Contact Person Name: _____ **Phone:** _____
(if other than owner)

Building Owner: _____ **Change in ownership of building?** _____

Building Owner Address: _____

Building Owner Phone: _____

Applicant

All information provided herein is true and correct and all provisions of the ordinances of the City of Hayden shall be complied with. I hereby certify that the proposed use is authorized by the owner of record and that I have been authorized by the owner to submit this application as his/her agent.

Print Name of Applicant

Signature of Applicant