

Telephone (774) 261-4030 Fax (774) 261-4030

## **Department of Inspection Services/Division of Code Enforcement**

## CHANGE OF OCCUPANCY PERMIT APPLICATION

APPLICATION DATE:	CHANGE OF OCCUPANCY PERMIT FEE \$50 Commercial / \$25 Residential		
ADDRESS:	<b>Utilities:</b>	☐ Public Water	□ Well
West Boylston MA 01583		☐ Public Sewer	☐ Septic Tank
Before a Change of Occupancy Permit wi	ll be issued, a detailed floor plan of e	existing must be submitted with	this application.
(If there are proposed floor p	olan changes then a formal Building	Permit Application must filled o	out.)
APPLICANT NAME:		PHONE:	
APPLICANT ADDRESS:			
PROPERTY OWNER NAME:		PHONE:	
PROPERTY OWNER ADDRES:			
PRIOR OCCUPANCY TYPE:			
PRIOR BUSINESS NAME:			
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PROPOSED OCCUPANCY TYPE:			
PROPOSED BUSINESS NAME:			
PROPOSED BUSINESS MAILING ADDRESS HAVE #			
PROPOSED BUSINESS UNIT #:		OPOSED BUSINESS FLO	OK #:
PROPOSED BUSINESS FLOOR AREA SQ	UARE FOOTAGE:		
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□ INSPECTED / REVIEWED BY:		DATE REVIEWED:	
COMMENTS (if any)			
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COMMENTS (if any)			