



VERIFICATION OF OCCUPANCY
 8930 N. Government Way, Hayden, ID 83835
www.cityofhaydenid.us (208) 772-4411

- I have not had a change in occupancy or usage
 If checked, please complete the required fields (*), print and sign below, and return to City of Hayden.
- I would like to be included in the City of Hayden's Business Registry Database

In order to comply with Hayden City Code 9-1-3 (Certificate of Occupancy), this form must be completed to change or establish a new use in a building which is owned, rented, or leased. Occupancy and/or use of structure or land shall not be permitted until approval has been issued by the City of Hayden.

*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 Current Parking Spaces: _____ Number of Employees: _____

Days/Hours of Operation: _____

Anticipated work or alterations to be performed: _____

Business Owner Name: _____ Phone: _____

Business Owner 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.

Printed Name of Applicant

Signature of Applicant

Office Use Only

____ BD
 ____ BL