

RESIDENTIAL \$100.00 \_\_\_\_\_  
 COMMERCIAL \$200.00+ (see chart) \_\_\_\_\_  
 INDUSTRIAL \$500.00+ (see chart) \_\_\_\_\_

**APPLICATION FOR OCCUPANCY PERMIT  
 WITHIN THE VILLAGE OF MIDDLEFIELD**

14860 North State Avenue  
 P.O. Box 1019

Phone: (440) 632-5248  
 Fax: (440) 632-0591

The undersigned hereby makes application for Occupancy in accordance with the requirements of section 1140 of the Village of Middlefield Municipal Ordinances. The undersigned agrees that the premises described below **shall not be occupied** until an Occupancy Permit has been issued.

Date of Application: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_ Telephone No. \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Address of Premises to be occupied: \_\_\_\_\_

Square Footage \_\_\_\_\_ Land Lot/Parcel \_\_\_\_\_ Zoning \_\_\_\_\_

Proposed Date of Occupancy \_\_\_\_\_ Zoning Permit No. \_\_\_\_\_

Use of Building \_\_\_\_\_ New \_\_\_\_\_ Alteration \_\_\_\_\_

Owner of Building \_\_\_\_\_ Former Occupant \_\_\_\_\_

\_\_\_\_\_  
 Signature of Owner Date

\_\_\_\_\_  
 Signature of Applicant Date

\_\_\_\_\_  
 Print Name

\_\_\_\_\_  
 Print Name

\_\_\_\_\_  
 Phone/Fax

\_\_\_\_\_  
 Phone/Fax

**REQUIREMENTS FOR PERMIT:**

1. Approved site plan Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_
2. Approved Foundation elevation check Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_
3. Approved Record As-Built Drawings Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_
4. Residential Occupancy Permit  
 Geauga County Building Dept. Yes \_\_\_\_\_ No \_\_\_\_\_ No. \_\_\_\_\_
5. Impact Fee Paid Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_
6. Fire Department Approval (Commercial) Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_