



COMMERCIAL APPLICATION (PAGE 2)

BUSINESS NAME:	
----------------	--

PROJECT DETAILS	PROJECT USAGE
TOTAL SQ. FEET: <u>2,000</u>	IS THE BUSINESS OPEN TO PUBLIC <input checked="" type="radio"/> YES or NO
TOTAL ACRES OF DISTURBED LAND: <u>Less than 1</u>	WILL BUSINESS HAVE OVERNIGHT FACILITIES YES or <input checked="" type="radio"/> NO
# OF BEDROOMS: <u>N/A</u>	WILL THERE BE PUBLIC RESTROOMS <input checked="" type="radio"/> YES or NO
# OF RESTROOMS: <u>2</u>	WILL THERE BE FOOD PREPARATION YES or <input checked="" type="radio"/> NO
# OF KITCHENS: <u>N/A</u>	WILL THERE BE SALE OF UNPREPARED FOOD YES or <input checked="" type="radio"/> NO
KITCHEN ISLAND: YES or NO	TYPE OF FOOD BEING SOLD: COLD / SHELF
GARAGE: ATTACHED or DETACHED HEAT:	MATERIALS BEING STORED (LIST ALL POTENTIAL HAZARDOUS MATERIALS)
JACUZZI TUB: YES or NO	<u>N/A</u>
HEAT: ELEC or <input checked="" type="radio"/> LP	
WATER: ELEC or <input checked="" type="radio"/> LP	
FIREPLACE: YES or NO	
LOGLIGHTER: YES or NO	

STRUCTURAL INFORMATION (CIRCLE APPLICABLE)	EMPLOYEE INFORMATION
<input checked="" type="radio"/> METAL FRAME	NUMBER OF EMPLOYEES (FULL TIME): <u>5</u>
WOOD FRAME	NUMBER OF EMPLOYEES (PART TIME): _____
TYPE OF ROOF: _____	NUMBER OF EMPLOYEES PER SHIFT: _____
OTHER: _____	

PROJECT OPERATION	DAY CARE CENTER INFORMATION
HOURS OF OPERATION: <u>10</u> TO <u>8 PM</u> 24 HOURS	SIZE: NUMBER OF CHILDREN: _____
DAYS OF OPERATION: <u>Mon</u> TO <u>Sunday</u>	ADULT: (NUMBER) _____
OR OTHER: _____	TYPE: IN HOME CENTER
	KINDERGARTEN / NURSERY / SCHOOL AGE

BUSINESS OWNER SIGNATURE
PROPERTY OWNER SIGNATURE
BUILDER SIGNATURE

<u>9-13-11</u>
DATE
DATE
DATE

Contact: MOSTAPHA AYACHI Phone: 469-231-2872