



CITY OF SIDNEY

www.sidneyoh.com

USE COMPLIANCE CERTIFICATION

Business Name (DBA) _____

Facility (Site) Address _____

Mailing Address (if different) _____

Contact Person _____ Phone _____ E-mail: _____

FEIN (Federal Employer Identification Number) _____

Property Owner (if different than Business) _____

Leasing Agent / Property Manager _____ Phone _____

Previous Business Name and Use at this address _____

Business Operation Information

Are you relocating within the City? Yes No

Are you expanding to an additional location? Yes No

Are you a new business in the City? Yes No

Anticipated date of opening / occupancy:..... _____

Building Information

Does this business occupy the entire building? Yes No

Number of stories above ground:..... _____

Will the basement be used for storage or work area? Yes No

Is this a multi-tenant building? Yes No

Are you currently occupying the building? Yes No

If yes, what date did you begin? _____

Number of square feet this business occupies: _____

Proposed Use Group (check all that apply)

Assembly A1 A2 A3 A4 A5

Business Office B

Educational E1

Factory F1 F2

High Hazard H1 H2 H3 H4 H5

Institutional I1 I2 I3 I4

Mercantile M1

Storage S1 S2

Utility U

Residential R1 R2 R3 R4

Daycare A3 E I1 I4 R3

*Please request "Occupancy and Use Classification" document if you are unsure of your use group

Describe IN DETAIL the type of business, including its function, special equipment, materials and processes, etc:

[Empty box for business description]

*Will you be installing or changing signs? Yes No

*Will you be using any temporary signs? Yes No

*Will you store equipment or materials outside? Yes No

*Will you be storing vehicles outside for repair or sale? Yes No

Will you display merchandise outside? Yes No

Will you have a specific delivery or loading area? Yes No

Will you have a large trash container outside? Yes No

Does an enclosure already exist for the trash container? Yes No

Typical time of operation: open at _____ close at _____

How many shifts (typical)? 1 2 3

Does this building have a basement? Yes No

Will the basement ever be used by the public? Yes No

*If yes, a separate permit is/may be required in addition to the Use Compliance Certificate

NOTE: If you are doing any interior or exterior construction or modification of the electrical, mechanical or plumbing systems a permit may be required.

Existing Fire Protection System
Sprinklers: Full NFPA 13 Limited Area Hood
 Other sprinkler _____
Alarm: Automatic Manual Access Control

Utilities (Water, Sanitary, and Storm Sewer) System
*What is your Standard Industrial Classification (SIC) Code? _____
* If industrial, a Data Disclosure Form is required
Do you produce / manufacture a product? Yes No
A copy of the most recent Backflow Certification is required to be submitted with this application.

Applicant Certification

Application is hereby made for a USE COMPLIANCE CERTIFICATION for occupancy of a commercial or industrial property. All activities shall be completed in accordance with the requirements of all city, state, and federal regulations. Furthermore, the undersigned attests that no easement, covenant or deed restriction exists which legally prevents occupancy.

I HEREBY CERTIFY THAT THE ABOVE INFORMATION AND ATTACHMENTS ARE ACCURATE TO THE BEST OF MY KNOWLEDGE. I ALSO ACKNOWLEDGE THAT PROVIDING INNACURATE INFORMATION ON THIS APPLICATION OR ATTACHMENTS MAY INVALIDATE THE APPLICATION OR SUBSEQUENTLY APPROVED CERTIFICATION.

Signature _____ Date _____

Contact Person (for this application) _____ Phone _____

Title _____ E-mail _____

Please check this box if you would like an initial response within 5 business days. The initial response from City staff will include "red flag" issues only and does not constitute a complete review and approval of the occupancy.

Business website (optional) _____

City Contacts:
 Barbara Dulworth (Zoning) 937-498-8131; bdulworth@sidneyoh.com
 Dallas Davis (Fire) 937-498-8186; ddavis@sidneyoh.com
 Jon Crusey (Public Works/Utilities) 937-498-8141; jcrusey@sidneyoh.com
 Jacob Lyons (GIS) 937-498-8744; jlyons@sidneyoh.com
 Lesley Schweitzer (Income Tax) 937-498-8707; lschweitzer@sidneyoh.com
 William Blakely (Underground Utilities) 937-498-8152; wblakely@sidnyoh.com

Office Use Only

Application Number: _____ Date Submitted: _____ Fee Paid (\$10.00) _____ Receipt #: _____

Zoning District: _____ Section Reference: _____ Backflow Certificate attached:

APPROVALS:

COMMUNITY DEV DEPT _____ <div style="display: flex; justify-content: space-between; width: 90%; margin-left: 5%;"> Initials Date </div>	GIS DEPT: _____ <div style="display: flex; justify-content: space-between; width: 90%; margin-left: 5%;"> Initials Date </div>
FIRE DEPT: _____ <div style="display: flex; justify-content: space-between; width: 90%; margin-left: 5%;"> Initials Date </div>	PUBLIC WORKS DEPT: _____ <div style="display: flex; justify-content: space-between; width: 90%; margin-left: 5%;"> Initials Date </div>
UTILITIES DEPT: _____ <div style="display: flex; justify-content: space-between; width: 90%; margin-left: 5%;"> Initials Date </div>	

PERMIT # _____ DATE APPROVED: _____

DISTRIBUTION LIST:

Revenue Collections – Office Supervisor	911 Dispatch Center
Fire Dept – Deputy Chief	Public Works - Director
Police Dept – Chief	