



Print

Application for Certificate of Use

Pursuant to Section 39-19 of the Broward County Zoning Code, the original Certificate of Use must be posted at the business location at all times. Failure to comply with conditions can result in the certificate being revoked.

Business Owner Information						
Business Owner/Corporation/Partnership				Business Name		
Address		Building	Bay/Suite	City	State	Zip
Business Phone		Other Phone		FAX	Email	
Location Information						
Zoning District	Original Permit No. (if known)		Folio No.	Property Owner Name (if different from Business Owner)		
Business Information						
Commercial Vehicles Stored Here? <input type="checkbox"/> Yes <input type="checkbox"/> No			Existing/Proposed Signage? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Business Type		Business Type Description		No. of Employees	Hours of Operation	
No./Type of Commercial Vehicles		Previous Occupant/CU No.		Previous Business Type		
Please describe in detail the nature and type of business to be conducted on the premises						

I certify that I have read the requirements and information I have provided is accurate and true. I am authorized by the property owner to make this application.

Business Owner's Signature

Date

NOTARY PUBLIC

STATE OF FLORIDA
 COUNTY OF BROWARD

The foregoing instrument was acknowledged before me, the undersigned Notary Public, by means of physical presence or online notification, this _____ day of _____, _____, by _____ who is: Personally Known to me, or Produced Identification Type of identification produced _____.

(NOTARY SEAL)

 Signature of Notary Public-State of Florida

 Name of Notary Typed, Printed or Stamped

OFFICE USE ONLY	CU No. _____	<input type="checkbox"/> Approved <input type="checkbox"/> Denied
	Inspection Date _____	COMMENTS, CONDITIONS & LIMITATIONS: _____
	<input type="checkbox"/> Commercial <input type="checkbox"/> Residential	_____
	<input type="checkbox"/> New Building <input type="checkbox"/> Business Name Change	_____
	<input type="checkbox"/> Joint Occupant <input type="checkbox"/> Owner Name Change	_____
<input type="checkbox"/> Home Office <input type="checkbox"/> Use/Occupant Change	_____	