



### Commercial Inspection Information Sheet

### For New or Renewed Non Residential Occupancy Permits

Please print or type the information below, it is vital that our records reflect the most current information on your business and those responsible for it. The completed form should be returned with your payment of **\$124.00** for the annual *Non-Residential Occupancy Permit* made payable to the City of College Park

#### ABOUT THIS BUSINESS

**Business Operating Name:** \_\_\_\_\_

**Type of Business:** \_\_\_\_\_

**Address (in the City):** \_\_\_\_\_ **Expiring License #** \_\_\_\_\_

**Name of On-Site Manager:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax Number:** \_\_\_\_\_

#### THE BUSINESS OWNER:

**Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

*Address at which you agree to receive notices and delivery of official documents*

**E-Mail Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Cellular:** \_\_\_\_\_ **Fax Number:** \_\_\_\_\_

#### THE PROPERTY OWNER

**Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**E-Mail Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Cellular:** \_\_\_\_\_ **Fax Number:** \_\_\_\_\_

#### TRASH COLLECTION

**Service Provider:** \_\_\_\_\_

**Container Type:**  Toter  Dumpster (*must be enclosed*)

#### COUNTY INFORMATION

(Attach a Copy Similar to Sample on the Right)

*Prince George County Use & Occupancy Permit Number*

*Date Issued*

*Prince George's County requires that its Use & Occupancy Certificate be conspicuously displayed at this location. City of College Park Code Enforcement Officers will confirm physical display of this document during the inspection.*

*The City will not issue its Non-residential occupancy permit until a copy of the valid County permit has been received.*

PRINCE GEORGE'S COUNTY  
 Department of Environmental Resources  
 Permits and Review Division

**CERTIFICATE OF OCCUPANCY**

EFFECTIVE DATE: \_\_\_\_\_ CASE NUMBER: \_\_\_\_\_

CASE COMMENTS  
 PERMISSION IS HEREBY GRANTED TO OCCUPY  
**YOUR BUSINESS ADDRESS HERE**

OWNERSHIP: \_\_\_\_\_ PARKING SPACES: \_\_\_\_\_  
 USE GROUP: \_\_\_\_\_ SPECIAL EXCEPTION: \_\_\_\_\_  
 CONST. TYPE: \_\_\_\_\_ LOT: \_\_\_\_\_  
 TAX MAP: \_\_\_\_\_ BLOCK: \_\_\_\_\_  
 ZONE: \_\_\_\_\_ PARCEL: \_\_\_\_\_

USE (MNCPPC ZONING)  
*Authorized use entered here*  
 LIMITATIONS (UP TO)

<b>PROPERTY OWNER</b> Name(s) of Current Property Owner Current Mailing Address City, State 12345
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<b>OCCUPANT</b> Your Name/Business Name Address should be same as above College Park, MD 20740
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#### THIS FORM WAS COMPLETED BY

\_\_\_\_\_  
 Printed Name Title Signature Date