

City of Shawnee



BUSINESS
APPLICATION
ZONING CLEARANCE/
OCCUPANCY PERMIT

Planning Office

405-878-1666
222 N Broadway Ave
Shawnee OK 74801-6917
www.ShawneeOK.org
FAX: (405) 878-1587

DATE RECEIVED _____ PERMIT NO. _____ INSPECTOR _____

BUSINESS NAME _____ STATE TAX # _____

BUSINESS ADDRESS _____ CITY _____ STATE _____ ZIP _____

BUSINESS PHONE# _____ FAX # _____ CELL/PAGER _____

LEGAL DESCRIPTION: LOT _____ BLK. _____ SUBDIVISION _____

BUSINESS DESCRIPTION: (Services provided and/or types of products to be handled or sold)

APPLICANT'S NAME _____ CONTACT# _____

APPLICANT'S ADDRESS _____ CITY _____ STATE _____ ZIP _____

PROJECTED OPENING DATE _____

APPLICANT'S SIGNATURE _____ DATE _____

Approval of this permit will certify that the sue proposed is in compliance with the City of Shawnee Zoning Ordinance, and the existing structure(s) is in compliance with the adopted Building Code and Fire Prevention codes of the City of Shawnee. However, said approval shall not be taken as authority to violate, cancel, alter, or set aside any provision of the adopted Code of the City of Shawnee.

CITY INSPECTOR _____ DATE _____

CITY APPROVAL DENIAL ZONING OF PROPERTY _____

COMMENTS: _____

APPLICATION FEE \$25.00
CASH/CREDIT CARD/CHECK# _____

ISSUED DATE _____
ISSUE BY _____