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## Change of Use/Occupancy Application

Use this form for:

- Changes in Land Use ([Reference Table 15.04.020. Table of Allowed Uses](#))
- Changes in Tenant or Occupancy Type (Example: Group M – Mercantile to Group A – Assembly)
- Group Homes, Recovery Residences, Sober Living Homes or similar types of residential dwellings used by persons protected by the provisions of the Federal Fair Housing Act (FHA)

**Please note that if any changes to structures or the site are proposed, additional permits may be required.**

Date:			
Property Address:			
Name of <u>Previous</u> Business and Land Use:			
Name of <u>Proposed</u> Business and Land Use:			
Applicant Information	Property Owner Information		
Name _____	Name _____		
Company _____	Company _____		
Address _____	Address _____		
Phone _____	Phone _____		
Email _____	Email _____		
Applicant Signature (Required)	Date	Property Owner Signature (Required)	Date
Description of Proposed Use			
Describe the proposed use in detail (Attach additional pages if necessary).			
Will there be any external modifications to the building or site? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes to any changes or modifications, provide a brief description:	
Will there be any internal modifications to the building? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>Please note: if any changes to structures are planned or proposed, additional permits may be required such as a site plan waiver for site modifications or a building permit for any external or internal building modifications.</b>			
Certification of Information Above			
By signing above, as either applicant or property owner, I certify that the information and exhibits submitted are true and correct to the best of my knowledge and that in filing this application, I am acting with the knowledge and consent of the owners of the property. In submitted application materials and by signing this application, I acknowledge and agree that the application is subject to all terms and conditions found in Title 15 of the City of Longmont Municipal Code. I understand that false statements or omissions may result in denial or revocation of this application and jeopardize the approval of future permits. I acknowledge that I have read the application regulations associated with this application and agree to fully comply with City of Longmont Regulations and agree to comply with any terms and conditions imposed by the decision-making body as they relate to a change of use.			
Planning and Development Services Staff Use Only			
Approval Date:	Approval Signature:		