



# City of Sidney

P.O. Box 79, Sidney, NE 69162 • (308) 254-5300 • Fax (308) 254-3164

## APPLICATION FOR USE OCCUPANCY

Business Name: \_\_\_\_\_ Date: \_\_\_\_\_

Business Address: \_\_\_\_\_

Owner/Tenant Name (1): \_\_\_\_\_

Owner/Tenant Address (1): \_\_\_\_\_ Phone # \_\_\_\_\_

Owner/Tenant Name (2): \_\_\_\_\_

Owner/Tenant Address (2): \_\_\_\_\_ Phone # \_\_\_\_\_

Description of the proposed business **(MUST BE IN DETAIL)**: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of Applicant(s): \_\_\_\_\_

\_\_\_\_\_

**To be valid:** Must be completed in full by the City Building Department | Must have two of the three signatures

This application for Certificate of Use Occupancy must be accompanied with the following:

- a. A plan, drawn to scale in duplicate showing the location of all buildings or structures and any parking to be provided on the lot or tract of land involved.
- b. An accurate dimensions of the lot or tract of land and all buildings or structures built or to be built on the lot or tract of land; the location of the main building or each adjacent lot.
- c. Any other information required to enable the City Staff to determine if the plan complies with zoning regulations.

Dimensions of Lot or Tract of Land: \_\_\_\_\_

Dimension of Building or Unit: \_\_\_\_\_

Square Footage of Building or Unit: \_\_\_\_\_

Legal Description: Lot \_\_\_ Block \_\_\_ Subdivision \_\_\_\_\_

Current Zoning: \_\_\_\_\_ Adjoining & Adjacent Zoning: \_\_\_\_\_

DATE: \_\_\_\_\_ Approved, \_\_\_\_\_ Denied, \_\_\_\_\_

City Manager

DATE: \_\_\_\_\_ Approved, \_\_\_\_\_ Denied, \_\_\_\_\_

Chief Building Official

DATE: \_\_\_\_\_ Approved, \_\_\_\_\_ Denied, \_\_\_\_\_

Asst City Manager | Public Service Director | Zoning Adm