



**COMMERCIAL CHANGE OF OCCUPANCY OR
NEWLY ANNEXED PROPERTY BUSINESS
REGISTRATION APPLICATION
20025 HWY 6, Manvel, TX 77578
Phone: 281/489-0630 Fax: 281/489-0634**

Address of Business		Name of Proposed Business	
Zoning District	Subdivision (if any)	Shopping Center (if any)	Legal Description.
Owner of Building	Mail Address	Zip	Phone
Name of Proposed Occupant (Tenant)	Mail Address	Zip	Business Phone
2007 NAICS Number and Description			
To locate your 2007 NAICS number and business description you may come to city hall to look at our book or you may locate the number and description by visiting the NAICS website at http://www.census.gov/eos/www/naics			
Type of Proposed Business (please be specific)			
Previous Business			
Business Hours	Anticipated date of move-in	Number of employees	
DESCRIBE BUSINESS IN DETAIL: (INCLUDE ALL ACTIVITIES)			
Applicant Printed Name	Applicant Contact Number	E-mail Address	
Occupied Space Square Feet: _____ Do you plan any changes? _ Structure _ Plumbing _ Electrical _ A/C _ Other A plan is required to be presented to PD and Z before any alterations can begin. If any mis-representation is found once you open your business, your Certificate of Occupancy WILL BE REVOKED. PLEASE INITIAL THAT YOU UNDERSTAND THIS STATEMENT. _____ I am aware that I must apply for and receive a sign permit before I erect any sign in Manvel. I have received a copy of the sign ordinance. _____ Applicant Date		<u>FOR OFFICE USE ONLY:</u> <u>FEES</u> _____ \$100 Change of Occupancy _____ \$0 Registering New Business Rcvd By (initial's) _____ Date _____ Application Number _____ This is a conditional Certificate of Zoning Compliance Approval: Zoning Official _____ Date _____ Code Enforcement _____ Date _____ Building Official _____ Date _____ Fire Marshal _____ Date _____	

CITY OF MANVEL

<http://www.cityofmanvel.com>



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Manvel, Texas 77578

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QUESTIONNAIRE FOR CHANGE OF TENANCY APPLICATION PLEASE ANSWER YES OR NO ON ALL OF THE QUESTIONS

IF ANY OF THE INFORMATION LISTED BELOW IS FOUND TO BE UNTRUE, PERMIT WILL BE DENIED AND IF YOU HAVE ALREADY OPENED, YOUR CERTIFICATE OF OCCUPANCY WILL BE REVOKED UNTIL ALL ITEMS ARE CORRECTED. PLEASE INITIAL THAT YOU UNDERSTAND THIS STATEMENT _____

1. Are you going to be doing ANY type of remodeling? _____
Building owners or contractors are required, before performing work such as demolition, alteration or renovation on any commercial or public building to have an asbestos survey completed by a person licensed under the Texas Asbestos Health Protection Act, effective 9/1/2001.
Exceptions are: Industrial or manufacturing facilities with restricted areas, Apartments with fewer than four units, Federal and Military Buildings
COMPLETED SURVEY MUST BE SUBMITTED WITH A SEPARATE PERMIT APPLICATION
2. Do you have Fire Extinguishers? _____
3. Do you have a Backflow Preventer installed? _____
If not, one will need to be installed by a Licensed Master Plumber and a separate permit application submitted by the Plumber will need to be submitted. An inspection will need to be conducted and a completed City of Manvel Backflow Prevention Assembly Certified Test Report must be on site at the time of inspection.
If a Backflow Preventer is already installed, is the inspection current? _____
Remember it is your responsibility to make sure the Backflow Preventer is inspected annually and a copy of the inspection report submitted to the City of Manvel.
4. Have you set up your Water Account with the City of Manvel? _____
5. If you are serving food, do you have a Grease Trap installed? _____
If not, specs of the grease trap must be submitted to the city for our review and a separate permit will need to be pulled by a licensed Master Plumber. An inspection of the grease trap will need to be done prior to opening.
6. Do you have a Vent Hood System? _____
7. Have you contacted the Brazoria County Health Department to see if you need a permit or an inspection from them? _____
Is the Health Department certificate posted? _____
8. Is the address posted clearly on the building? _____
9. Are the exits marked clearly and properly? Are they operable with battery backup and emergency exit lights? _____
10. Do you have a Handicap Ramp? _____
11. Are the restrooms ADA compliant? _____
12. Does your parking lot have parking for handicap accessibility? Is it striped? _____
13. Is the Occupancy Load posted? _____
14. Do you have an out swing exit door? _____
15. Is your breaker box clearly labeled? _____
16. Are all electrical connections covered? _____
17. Have you applied for a Sign Permit? _____

Date Signed and Phone Number

Location

Signature