



Application for Certificate of Occupancy
Public Works Department
City of Watauga, Texas

Date of Application: _____ Area Square Footage: _____

Property Address (Ste. # if applicable): _____

Classification Use: _____
(Office, Retail, Service Establishment, Service Station, Warehouse, Pawn Shop, Used Mdse.)

Certificate of Occupancy will cover only the uses requested.

****A sales tax certificate shall be required listing the business address with "Watauga, TX 76148" on the certificate.**

Does your occupancy or business involve the storage, sale or use of the following:

Yes ☐ No ☐ Food Products:

☐ On premises ☐ Take out

Yes ☐ No ☐ Drive-through window

Yes ☐ No ☐ Flammable or combustible liquids

Yes ☐ No ☐ Poisonous or hazardous chemicals

Yes ☐ No ☐ Compressed gas

Yes ☐ No ☐ Painting with flammable paints

Yes ☐ No ☐ Garage or vehicle repair

Yes ☐ No ☐ Reclaiming waste

Yes ☐ No ☐ Dust producing equipment or material

Yes ☐ No ☐ Explosives or ammunition

Yes ☐ No ☐ Fumigation

Yes ☐ No ☐ Woodworking or refinishing

Yes ☐ No ☐ Storage of combustible materials

Yes ☐ No ☐ Outdoor storage of materials

Yes ☐ No ☐ Outdoor display of merchandise

Yes ☐ No ☐ **Alcohol to be sold**

Yes ☐ No ☐ Small Business

Yes ☐ No ☐ Franchise

Yes ☐ No ☐ Chain

Name of Business/Company (Tenant)

Mailing Address

Business Email Address

Business Phone Number

Owner of Premises

Owner Address (Street, City, State, Zip)

Phone Number

Applicant's Name

Applicant Address (Street, City, State, Zip)

Phone Number

OFFICE USE ONLY:

Lot: _____ Block: _____

Addition: _____

CO Permit: _____

Original Permit: _____

New Permit: _____

Occupancy Group: _____ Zoning: _____

Construction Type: _____

Occupancy Load: _____

Sprinkler Required: _____ Present: _____

Shopping Center: _____

ZONING VERIFICATION: Planning & Development Representative: _____ Date: _____

APPLICATION APPROVED: Building Inspector: _____ Date: _____

Fire Marshall: _____ Date: _____ Building Official: _____ Date: _____