



Department of Planning and Development
Building 'Use' Change Form
1499 E West Maple, Walled Lake, MI 48390
248-624-4847 Fax 248-624-1616

For Department Use Only _____
Fee(s) _____

BUILDING 'USE' CHANGE FORM

DATE _____ SITE ADDRESS _____

The Building Code of the State of Michigan has different code requirements for different types of building uses. Each building, upon completion of construction, must receive a 'Change of Occupancy' from the City Building Official certifying, essentially, that the building is approved for the intended use(s).

Should the intended use of the building change (e.g. different tenant with a different business), the City's Building Official, Zoning Administrator and Fire Marshall must review the building plans and zoning requirements to determine if the revised use of the building meets minimum requirements for that particular use or if an adjustment to the building or zoning is needed.

This form is a request for a building use review and approval from the City's Building Official, Zoning Administrator and City's Fire Marshall.

1. Owner Information

Name _____ Address _____
City _____ State _____ Zip Code _____ Phone _____
Email Address _____

2. Tenant Information (if applicable)

Name _____ Address _____
City _____ State _____ Zip Code _____ Phone _____
Email Address _____

3. Building Use Information

Current Certificate of Occupancy Use: _____
Requested Building/Space Use: _____
Square footage to be occupied: _____
Hours of Operation: _____
For Emergency Purposes Average Number of Employees/Customers on site at any time: _____
Contact Name/Number: _____
After Hours Contact Name/Number: _____
Types of products sold/used: _____
Names of hazardous or potentially hazardous materials (attach a separate sheet if necessary): _____
Copy of Lease Agreement is attached.

Please Note: Additional Information May Be Needed

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The approval of the above use and occupancy change(s) is limited to those described above, and any further change, expansion or addition from the approved use(s) is expressly prohibited. Prior to any change in use or occupancy, the owner and/or applicant shall obtain a fire safety inspection and general building special inspection from the City.

Applicant's Signature Date

Property Owner Signature Date

For Department Use: Per all City Codes and Ordinances; the adopted Michigan Residential Code, and the adopted Michigan Building Code.	
Approved/Not Approved by _____ Planning/Zoning	Date _____
Approved/Not Approved by _____ Building	Date _____
Approved/Not Approved by _____ Fire Department	Date _____
Approved/Not Approved by _____ DPW Water Division (cross connections/meter)	Date _____