



Date: \_\_\_\_\_

# Request for Change of Occupancy, Occupant or Land Use Review

This form is required for changes in business or zoning use for a commercial, industrial or public multifamily building. It serves as a request for review and/or inspection. Upon review of application, staff will determine whether a certificate of occupancy (new use) or a letter of land use registration (similar use) will be issued.

**SITE ADDRESS:** \_\_\_\_\_

Leasing unit/building     Recently purchased or planned purchase of unit/building

Space: \_\_\_\_\_ sq. ft.    Year constructed: \_\_\_\_\_

## Applicant Information

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

## Previous Occupant Business Information

Name of Business: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact Person (print): \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Describe how previous occupant used space: \_\_\_\_\_

## Proposed Business Information

Name of Business: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact Person (print): \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Describe proposed use of space: \_\_\_\_\_

## Notes to Applicant

- The Building Inspections Division issues a certificate of occupancy (new use) when the building is found to be in compliance with current code requirements for the proposed use. A site inspection may be needed.
- The Planning Division issues a letter of land use registration when it is determined that the proposed business satisfies the City of Shakopee zoning codes.
- Review normally requires five working days from receipt of the **COMPLETE** application **AND** required information.

The undersigned hereby represents upon all of the penalties of the law, for the purpose of including the City of Shakopee to take the action herein requested, that all statements are true, and that all work herein will be done in accordance with the ordinances of the City of Shakopee and the State of Minnesota.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

## Submittal Checklist

- \_\_\_ Completed application
- \_\_\_ Indoor plan layouts, room sizes, described uses
- \_\_\_ Exterior building plan, parking plan, outdoor storage plan

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### CITY OF SHAKOPEE USE – APPROVED BY:

\*Note: Not all reviews require approval by all departments listed below

\_\_\_\_\_  
Building Department

\_\_\_\_\_  
Date

\_\_\_\_\_  
Planning Department

\_\_\_\_\_  
Date

\_\_\_\_\_  
Fire Department

\_\_\_\_\_  
Date

\_\_\_\_\_  
City Clerk

\_\_\_\_\_  
Date

Notes:

Certificate of occupancy

Previous classification: \_\_\_\_\_

Land use registration

New classification: \_\_\_\_\_

Zoning district: \_\_\_\_\_

Permit #: \_\_\_\_\_