

**BUSINESS REGISTRATION
DEPARTMENTAL APPROVAL FORM**

BUSINESS NAME: _____

PHYSICAL ADDRESS: _____

Owner: _____ Leased : _____ (Attach copy of lease)

UTILITY ACCOUNT

Has there been a previous account at this location? YES NO

What type of service? Water () Sewer () Refuse () _____

Has services been applied for? _____

Comments: _____

Last Date of Service: _____ Previous Business Type: _____

Utility Tech Signature: _____ Date: _____

Building Services:

Change of Occupancy inspection required? Yes _____ (65.00 fee) No _____

Permit Number: _____

Sumter County Fire Prevention Bureau

Change of Occupancy inspection required? Yes _____ (\$50.00 fee) No _____

If yes is a Fire Safety Inspection required? Yes _____ No _____

DEVELOPMENT SERVICES-DESIGN STANDARDS

Zoning Classification: _____ YES NO

Is location properly zoned for type of business? _____

Comments: _____

Approved: Yes () No () Pending () Contact Code Enforcement ()

Director's Signature: _____ Date: _____

CITY CLERKS OFFICE:

Is Application for complete? Yes _____ No _____

Approved: Yes () No () Pending () Signature: _____ Date: _____

Reason for Disapproval or Pending Status: _____