



**CITY OF TIPP CITY**  
[www.tippcityohio.gov](http://www.tippcityohio.gov)  
**USE COMPLIANCE CERTIFICATION**

Business Name (DBA) \_\_\_\_\_

Facility (Site) Address \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_

Contact Person \_\_\_\_\_ Phone \_\_\_\_\_ E-mail \_\_\_\_\_

FEIN (Federal Employer Identification Number) \_\_\_\_\_

Property Owner (if different than Business) \_\_\_\_\_

Leasing Agent / Property Manager \_\_\_\_\_ Phone \_\_\_\_\_

Previous Business Name and Use at this address \_\_\_\_\_

#### **Business Operation Information**

Are you relocating within the City?  Yes  No

Are you expanding to an additional location?  Yes  No

Are you a new business in the City?  Yes  No

Anticipated date of opening / occupancy \_\_\_\_\_

#### **Building Information**

Does this business occupy the entire building?  Yes  No

Number of stories above ground \_\_\_\_\_

Will the basement be used for storage or work area?  Yes  No

Is this a multi-tenant building?  Yes  No

If yes, what date did you begin? \_\_\_\_\_

Number of square feet this business occupies \_\_\_\_\_

#### **Proposed Use Group (check all that apply, if known)**

Assembly  A1  A2  A3  A4  A5

Mercantile  M1

Storage  S1  S2

Business Office  B

Utility  U1

Educational  E1

Residential  R1  R2  R3  R4

Factory  F1  F2

Daycare  A3  E  I1  I4  R3

High Hazard  H1  H2  H3  H4  H5

Institutional  I1  I2  I3  I4

\*Please request assistance from the Fire Department if you are unsure of your use group

**Describe IN DETAIL the type of business, including its function, special equipment, materials, and processes.**

#### **Additional Information**

Will you be installing or changing signs?  Yes  No

Will you be using any temporary signs?  Yes  No

Will you store equipment or material outside?  Yes  No

Will you store vehicles outside (repair or sale)?  Yes  No

Will you display merchandise outside?  Yes  No

Will you have a specific delivery or loading area?  Yes  No

Will you have a large trash container outside?  Yes  No

Does an enclosure already exist for the trash container? Yes No  
Typical time of operation: open at: \_\_\_\_\_ close at: \_\_\_\_\_  
How many shifts (typical)? 1 2 3  
Does this building have a basement? Yes No  
Will the basement ever be used by the public? Yes\* No  
\*If yes, a separate permit may be required in addition to the Use Compliance Certificate

**NOTE: If you are doing any interior or exterior construction or modification of the electrical, mechanical, or plumbing systems a permit may be required by Miami County.**

<b>Office Use Only</b>
<b>Existing Fire Protection System</b>
Sprinklers: <input type="checkbox"/> Full NFPA 13 <input type="checkbox"/> Limited Area <input type="checkbox"/> Hood
<input type="checkbox"/> Other sprinkler _____
Alarm: <input type="checkbox"/> Automatic <input type="checkbox"/> Manual <input type="checkbox"/> Access Control

<b>Office Use Only</b>
<b>Utilities (Water, Sanitary, and Storm Sewer) System</b>
*What is your standard Industrial Classification (SIC) Code? _____
* If industrial, a Wastewater Service/Discharge Disclosure Form is required
Do you produce / manufacture a product? <input type="checkbox"/> Yes <input type="checkbox"/> No

### Application Certification

Application is hereby made for a USE COMPLIANCE CERTIFICATION for occupancy of a commercial or industrial property. All activities shall be completed in accordance with the requirements of all city, state, and federal regulations. Furthermore, the undersigned attests that no easement, covenant, or deed restriction exists which legally prevents occupancy.

I HEREBY CERTIFY THAT THE ABOVE INFORMATION AND ATTACHMENTS ARE ACCURATE TO THE BEST OF MY KNOWLEDGE. I ALSO ACKNOWLEDGE THAT PROVIDING INNACURATE INFORMATION ON THIS APPLICATION OR ATTACHMENTS MAY INVALIDATE THE APPLICATION OR SUBSEQUENTLY APPROVED CERTIFICATION.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Contact Person (for this application) \_\_\_\_\_ Phone \_\_\_\_\_

Title \_\_\_\_\_ E-mail \_\_\_\_\_

Business website (optional) \_\_\_\_\_

#### City Contacts

Arthur Franklin (Zoning) 937-506-3166; [franklina@tippcity.net](mailto:franklina@tippcity.net)  
Adam Howard (Fire) 937-506-3950; [howarda@tippcity.net](mailto:howarda@tippcity.net)  
Jeremy Bowser (Public Works/Utilities) 937-506-3165; [bowserj@tippcity.net](mailto:bowserj@tippcity.net)  
Steve Cross (Income Tax) 937-506-3170; [crosss@tippcity.net](mailto:crosss@tippcity.net)  
Matt Spring (Community Development) 937-506-3172; [springm@tippcity.net](mailto:springm@tippcity.net)

#### Office Use Only

Permit Number: \_\_\_\_\_ Date Submitted: \_\_\_\_\_ Fee Paid (\$40) \_\_\_\_\_ Receipt #: \_\_\_\_\_

Zoning District: \_\_\_\_\_ Code Reference: \_\_\_\_\_

#### APPROVALS

COMMUNITY DEV DEPT: \_\_\_\_\_ UTILITIES DEPT: \_\_\_\_\_  
Initials \_\_\_\_\_ Date \_\_\_\_\_ Initials \_\_\_\_\_ Date \_\_\_\_\_

FIRE DEPT: \_\_\_\_\_  
Initials \_\_\_\_\_ Date \_\_\_\_\_

PERMIT # \_\_\_\_\_ DATE APPROVED: \_\_\_\_\_

#### DISTRIBUTION LIST

Tax Department   
Community Dev. Dir.   
Miami County Building Regulations   
Fire Department – Assistant Chief   
Address File