11333 N. Cedarburg Rd 60W
Mequon, WI 53092-1930
Phone (262) 236-2902
Fax (262) 242-9655
www.ci.mequon.wi.us

Department of Community Development

APPLICATION FOR BUSINESS OCCUPANCY PERMIT

Permit Fee: $60.00

Name of Business:			
Detailed Description of Occupancy Type or Work Performed:			
Business Address:	**Tax Key:** _____-_____-_____-_____._____		
Business Owner:	**Phone:** (_____)_____-_____		
Home Address:	**City:**	**State:**	**Zip:**
Manager's Name:	**Phone:** (_____)_____-_____		
Home Address:	**City:**	**State:**	**Zip:**
Building Owner:	**Phone:** (_____)_____-_____		
Building Owner's Address:	**City:**	**State:**	**Zip:**

Applicant

Signature_____**Date**_____

FOR STAFF USE ONLY	
NAIC CODE:	
ZONING:	

Approved By_____Date_____