

VILLAGE OF TOLONO, ILLINOIS

CERTIFICATE OF OCCUPANCY

Date of Certificate _____

1. Name of Applicant _____ Phone _____

Address _____
(STREET NO. AND NAME) (POST OFFICE) (STATE) (ZIP CODE)

2. Name of Local Agent _____ Phone _____

Address _____
(STREET NO. AND NAME) (POST OFFICE) (STATE) (ZIP CODE)

3. Property Owner of Record _____ Phone _____

Address _____
(STREET NO. AND NAME) (POST OFFICE) (STATE) (ZIP CODE)

4. Building Permit Number _____

5. Date Building Permit was Issued _____

6. Specific Use of the Building _____

7. Zoning District of Building _____

8. Has the Village Board of Trustees approved the water, wastewater, and drainage system connections? _____

The issuance of this Certificate of Occupancy is for the property located at _____

Occupancy is hereby granted with the stipulation that the building premises shall be preserved and maintained as herein described in this Certificate regarding its' specific use and use group.

(ISSUER)

Copies to the following parties:

Village Officials _____

Village Attorney _____

Village Files _____
