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Application for Certificate of Occupancy

\$100.00 due at time of Application.

No Fee required when submitted as part of Building Permit Application.

Obtain City Business License before submitting this Application.

This Application cannot be processed unless fully completed and all required documents are attached.

☐ **New Business location**

☐ **Expansion/Modification of Existing Business**

☐ **Existing Business – no CO**

Application Date:	Business License # or Receipt #:
1. Proposed occupant (business name), including any dba or aka:	
2. Address(es) to be occupied, including suite, unit, etc. List mailing address first, followed by address range if applicable. If this is an expansion, please list existing space occupied as well.	
3. Is this a sub-lease? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Business Name of other occupying tenant:	
4. Classify square footage of space occupied (both new and existing): Office: Warehouse: Retail: Production: Showroom: Total (all areas):	
5. Assembly occupancies, seating (i.e. fitness, recreational, educational, restaurants, etc.): <i>(Application must Include Seating Diagram/Class Schedule. Call Community Development at 913-477-7500 for additional requirements.)</i> Fixed: Bar: Waiting Area: Other: Total: <input type="checkbox"/> N/A	
6. Business park or shopping center name:	
7. Nature of business: <input type="checkbox"/> Warehousing <input type="checkbox"/> Production <input type="checkbox"/> Distribution <input type="checkbox"/> Sales <input type="checkbox"/> Service <input type="checkbox"/> Other:	
8. Kind of goods sold or advertised, or services provided:	
9. Products are sold: <input type="checkbox"/> Retail <input type="checkbox"/> Wholesale <input type="checkbox"/> Combination % of each if Combination: <i>Industrially zoned properties providing retail services must submit a floor plan reflecting areas open to the public.</i>	
10. Products are sold to: <input type="checkbox"/> General Public <input type="checkbox"/> Business Community <input type="checkbox"/> Combination	
11. Method of product storage: <input type="checkbox"/> Shelves <input type="checkbox"/> Racks <input type="checkbox"/> Piles <input type="checkbox"/> Other: <input type="checkbox"/> N/A	
12. Storage is located: <input type="checkbox"/> Interior <input type="checkbox"/> Exterior Storage Height: feet inches <input type="checkbox"/> N/A	
13. List type of machinery and/or equipment that will be installed: <input type="checkbox"/> N/A	

