



COMMUNITY DEVELOPMENT
OCCUPANCY INSPECTION
CHECKLIST APPLICATION

Case # OCC20__ - _____
Date _____
Rep. _____

Please read the following carefully.

To apply, please submit this application and all required documents by email to OccsZoning@leegov.com or in person at 1500 Monroe St, Fort Myers FL.

SIGNS: If you will be altering or erecting a sign you must apply for a sign permit, this includes tenant panel changes, even if an occupancy approval is not required.

Business Name: _____

Business Location Address: _____ Unit # _____

Contact Person: _____ Daytime Phone #: _____

Email Address or Fax #: _____

All communication from Lee County regarding your application will be sent to the email / fax listed.

Contact Person's mailing address: _____

Directions to property: _____

Provide a brief description and an explanation of the intent of your business. Include the hours of operation.

Will the electricity need to be connected? [] NO [] YES

Water Source: [] Well [] Public Water Waste Water Collection: [] Septic Tank [] Public Sewer

Will the landlord provide a 'Shared Container' for garbage collection? [] NO [] YES

If yes, landlord's name and phone#: _____

Has this building/unit been vacant for more than one year? [] NO [] YES

Check which of the following you are applying for, provide the items requested along with your application. Information on application types, submittal requirements and the process can be found on our website at http://www.leegov.com/dcd/BldPermitServ/OpenBusn.

For information regarding Auto Sales or an Impound Yard, please call (239) 533-8329, option 1 prior to making application.

- [] New Occupancy \$50, submit a site plan, submit the existing and proposed floor plan.
[] Tenant Change \$50 / \$25*, submit a site plan, submit the existing and proposed floor plan. Provide the name of the prior tenant: _____
*If there have been no building inspections in the last 2 years, the fee will be \$50.
[] Dog Dining \$50, Florida DBPR Number: _____ Provide original commercial or occupancy record number for restaurant with outdoor seating _____, submit site plan depicting area available to dogs.
[] Shared Space - Office \$25, provide name of current business: _____
[] Shared Space - Other \$50, submit a site plan, submit the existing and proposed floor plan, provide the name of the current business: _____
[] Executive Suite \$25, Name of Executive Suite: _____
[] Charter Boat \$25, Name of Marina: _____ Number of Passengers: _____
Provide permission letter from the marina.
[] Horse Boarding Non-Commercial \$25, Provide one copy of the site plan and proof of restroom facilities.
[] Plant Nursery \$25, Provide one copy of the site plan and proof of restroom facilities.

APPLICANT UNDERSTANDS THAT THE PROPOSED STRUCTURE MAY NOT BE USED OR OCCUPIED UNTIL AN APPROVED CERTIFICATE OF USE IS ISSUED.

I hereby certify that to the best of my knowledge, the information is true & correct, & complies with Deed of Restrictions.

Signature: _____ Date: _____

(3/8/2024)