

CITY OF WILLOWICK  
STATE OF OHIO  
APPLICATION FOR MULTIPLE DWELLING OCCUPANCY LICENSE

FOR THE YEAR \_\_\_\_\_ APRIL 1 TO \_\_\_\_\_ MARCH 31

REQUIRED BY THE CITY OF WILLOWICK ORDINANCE NO. 75-11

To: Building Inspector  
City of Willowick, Ohio

Re: Multiple Dwelling located at:  
\_\_\_\_\_, Willowick, Ohio

Application is hereby made for the approval of this application and  
for an Occupancy License for the described multiple dwellings:

APPLICANT:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Address

\_\_\_\_\_  
Officer or Agent

Applicant is: A Corporation \_\_\_\_\_  
Partnership \_\_\_\_\_

Association \_\_\_\_\_  
Individual \_\_\_\_\_

Nature and Extent of Interest of Applicant in the Multiple Dwelling:

( ) Owner ( ) Lessee

( ) Other (specify) \_\_\_\_\_

If other than owner, please complete the following:

Owner Name: \_\_\_\_\_

Phone No. \_\_\_\_\_

Address: \_\_\_\_\_

Social Security or Federal ID No. \_\_\_\_\_

Description of Building:

Address: \_\_\_\_\_

Type \_\_\_\_\_

No. of Buildings \_\_\_\_\_

Number of apartments, suites or groups into which building divided if  
a Section 1 (a) multiple dwelling (see Ordinance No. 1333.01 (a), as  
it may be amended) \_\_\_\_\_

Number of rooms if a Section 1 (b) multiple dwelling (see Ordinance No. 1333.01 (b) as it may be amended)

Basement or cellar \_\_\_\_\_

1<sup>st</sup> Floor \_\_\_\_\_

2<sup>nd</sup> Floor \_\_\_\_\_

3<sup>rd</sup> Floor \_\_\_\_\_

Other \_\_\_\_\_

Application for (check one)

( ) Original Occupancy License

( ) Renewal of Occupancy License

Date of prior application \_\_\_\_\_

Fee based on the following schedule as per Ordinance No. 91-50:

<u>UNITS</u>	<u>RATE PER BUILDING</u>
3-50	\$ 15.00 per building plus \$ 15.00 for each additional 50 suites plus \$ 25.00 per dwelling unit

All Occupancy Permits for multi-family dwellings shall detail the number and identification of all automobiles permitted to be parked on the site of said multi-family dwelling.

Statement of Compliance attached: \_\_\_\_\_

The applicant hereby certifies that he is the applicant above named and that he will maintain and operate the multiple dwelling above described in compliance with all Ordinances and Rules and Regulations of the City of Willowick and with all other laws, rules and regulations applicable to such building or its operation.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Authorized Signature

Date Received by \_\_\_\_\_

City: \_\_\_\_\_

Approved by: \_\_\_\_\_

Date of Approval: \_\_\_\_\_

License No. \_\_\_\_\_

\_\_\_\_\_

CITY OF WILLOWICK - RECEIPT FOR FEE

OCCUPANCY LICENSE

Date: \_\_\_\_\_

Received of \_\_\_\_\_

\$ \_\_\_\_\_ as fee for Multiple Dwelling Occupancy License for

building at \_\_\_\_\_ .

CITY OF WILLOWICK

By: \_\_\_\_\_