



RULES FOR ESTABLISHMENT OF OCCUPANCY

1. Complete the attached document.
2. Three (3) spot surveys of a recent date (**must be dated within the last five (5) years**), sealed and signed by an Illinois registered land surveyor.
3. Two (2) copies of Proof of Ownership must accompany each application.
 1. Copy of recorded Title Policy or
 2. Copy of recorded Deed or
 3. Copy of the lease from the owner of the property.
4. Submit, in writing, a detailed explanation of the type of business you are proposing to establish. This explanation should include, but not limited to the following information: The hours of operation, number of employees and the number of vehicles to be used in conjunction with the business; provide a sketch that contains a count of the number of existing parking spaces at the property site.
5. Three (3) sets of architectural (blueprint) plans, sealed and signed by an Illinois registered architect or structural engineer. If a food establishment, plans **must also** bear stamped approval from the Cook County Public Health Department, Food Program Manager, (708) 492-2035.

If occupying an existing structure and **no interior/structural changes have been made to the business establishment**, submit a notarized letter, in triplicate, attesting to the said fact. In addition, and if applicable, you **must submit** proof of Cook County Public Health Department approval. (See phone number in above paragraph). Also, if the property is served by well and septic and has been closed for a period of twelve months or more, you **must submit** proof of adequacy for the existing septic and well. Please contact Cook County Public Health Department for additional information.

6. If any electrical or plumbing work has been done to the premises, a letter of intent from the **registered** Electrical Contractor and/or Plumbing Contractor must also be submitted detailing work to be done.
7. Identification/Advertising signs **must also** secure permits. Requirements for sign permits (or face change of the sign) can be requested from the Department of Building and Zoning.
8. Fee of \$150 to be paid upon submittal of this request. Check to be made payable to Cook County Collector.

DEPARTMENT OF BUILDING AND ZONING
OF COOK COUNTY, ILLINOIS

DONALD H. WLODARSKI
COMMISSIONER OF BUILDING AND ZONING
OF COOK COUNTY



County Administration Building
69 W. Washington, Suite 2830
Chicago, IL 60602-3169
TEL (312) 603-0500
FAX (312) 603-9940
TDD (800) 526-0857

BUSINESS NAME: _____

OWNER'S NAME: _____

ADDRESS: _____

PHONE NUMBER: _____ **CITY** _____ **STATE** _____ **ZIP** _____
_____ **SOCIAL SECURITY #** _____

TENANT'S NAME: _____

ADDRESS: _____

PHONE NUMBER: _____ **CITY** _____ **STATE** _____ **ZIP** _____

ESTABLISHMENT ADDRESS: _____

INTENDED USE OF ESTABLISHMENT: _____

REAL ESTATE TAX NUMBER: _____ **FEIN #:** _____

NEW STRUCTURE? : Yes No

If existing structure, please answer the following questions:

1. Is property served by sewer & water or septic & well? _____
2. Has the establishment been closed for a period of twelve (12) months or more?
Yes No

Please indicate name and daytime telephone number of the person who can be contacted to arrange a Task Force Inspection of the site: _____

★★★ Office Use Only ★★★

Task Force Inspection Date: _____ **B**__ **P**__ **E**__ **F**__ **H**__ **Elevator**__ **Zoning**__

Annual Fees Current: Yes No **If no, paid:** _____

Remarks: _____

Approved by Commissioner: _____

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