



City of Ann Arbor

COMMUNITY SERVICES — BUILDING DEPARTMENT

Mailing: 301 East Huron Street | P.O. Box 8647 | Ann Arbor, Michigan 48107-8647

p. 734.794.6263 | f. 734.994.8460 | building@a2gov.org

Date Submitted: _____

PERMIT #: REOC _____

RE-OCCUPATION APPLICATION — COMMERCIAL

YOU MUST FILL IN ALL FIELDS

PROPERTY	<i>Address</i>	<i>Zoning District</i>
	<i>Between</i> _____ <i>And</i> _____	<i>Assessor Code</i>
PROPERTY OWNER	<i>Name</i>	<i>Ph</i>
	<i>Address</i>	<i>Fax</i> <i>Email</i>
TENANT	<i>Business Name</i>	<i>Ph</i>
	<i>Address</i>	<i>Fax</i> <i>Email</i>
	<i>Type of Business</i>	
	<i>Days and Hours of Business</i>	<i>Number of Employees</i>
BUSINESS OWNER/ MANAGER <small>if different from tenant</small>	<i>Contact Name</i>	<i>Ph</i>
	<i>Address</i>	<i>Fax</i> <i>Cell</i>
	<i>Email</i>	
HISTORIC DISTRICT		
<input type="checkbox"/> Yes <input type="checkbox"/> No District _____		
FLOOD PLAIN		
<input type="checkbox"/> Yes <input type="checkbox"/> No DNR-E Permit # _____ Approval _____		

PLEASE SUBMIT AN ELECTRONIC COPY OF A FLOOR PLAN WITH THIS APPLICATION. THE FLOOR PLAN MUST INCLUDE DIMENSIONS, EXISTING ELEMENTS, PROPOSED DEMOLITION, AND PROPOSED CONSTRUCTION.

ZONING

Previous Use: _____

Proposed Use: _____

For information about zoning requirements, contact planning@a2gov.org or 734.794.6265 prior to submission of your permit application.

BUILDING USE-OCCUPANCY CLASSIFICATION

- | | |
|---|---|
| <input type="checkbox"/> Vacant | <input type="checkbox"/> H-5 Hazardous production materials |
| <input type="checkbox"/> A-1 Assembly, theaters | <input type="checkbox"/> I-1 Institutional, supervised residential care |
| <input type="checkbox"/> A-2 Assembly, nightclubs, bars, restaurants | <input type="checkbox"/> I-2 Institutional, incapacitated, hospital, nursing home |
| <input type="checkbox"/> A-3 Assembly, rec centers, religious buildings | <input type="checkbox"/> I-3 Institutional, restrained, prisons |
| <input type="checkbox"/> A-4 Assembly, indoor sporting facilities | <input type="checkbox"/> M Mercantile |
| <input type="checkbox"/> A-5 Grandstands, stadiums, outdoor sporting events | <input type="checkbox"/> R-1 Residential, hotels, motels, boarding houses |
| <input type="checkbox"/> B Business | <input type="checkbox"/> R-2 Residential, multiple-family, fraternity, sorority |
| <input type="checkbox"/> E Educational | <input type="checkbox"/> R-3 Residential, 1 and 2 family and townhouses |
| <input type="checkbox"/> F-1 Factory and industrial, moderate hazard | <input type="checkbox"/> R-4 Assisted living (6-16 occ.) |
| <input type="checkbox"/> F-2 Factory and industrial, low hazard | <input type="checkbox"/> S-1 Storage, moderate hazard |
| <input type="checkbox"/> H-1 High hazard, detonation hazards | <input type="checkbox"/> S-2 Storage, low hazard |
| <input type="checkbox"/> H-2 High hazard, deflagration hazards | <input type="checkbox"/> U Utility, miscellaneous, garages, fences, sheds |
| <input type="checkbox"/> H-3 High hazard, physical hazards | <input type="checkbox"/> Mixed Uses |
| <input type="checkbox"/> H-4 High hazard, health hazards | |

SUPPRESSION SYSTEM

- | | | |
|-----------------------------------|---------------------------------------|-----------------------------------|
| <input type="checkbox"/> NFPA-13 | <input type="checkbox"/> Limited Area | <input type="checkbox"/> Partial |
| <input type="checkbox"/> NFPA-13R | <input type="checkbox"/> Range Hood | <input type="checkbox"/> Complete |
| <input type="checkbox"/> NFPA-13D | <input type="checkbox"/> None | |

ALARM SYSTEM

- | | | | | |
|---|--|-------------------------------|----------------------------------|-----------------------------------|
| <input type="checkbox"/> Manual | <input type="checkbox"/> Automatic Detection | <input type="checkbox"/> None | <input type="checkbox"/> Partial | <input type="checkbox"/> Complete |
| <input type="checkbox"/> Single Use | | | | |
| <input type="checkbox"/> Mixed Use - Separation Option: <input type="checkbox"/> Non-separated uses <input type="checkbox"/> Separated uses <input type="checkbox"/> Separate buildings | | | | |

OFFICE USE ONLY

ZONING NOTES

Notes: _____

Approval: _____ Date: _____

BUILDING NOTES

Notes: _____

Approval: _____ Date: _____

FEEES

Zoning Review: \$24	TOTAL: \$194
Building Review: \$170	

Revised 8/8/2020

Payment Sheet must be faxed to 734-994-8460

Please put the property address in the subject line when submitting.