



Application for Occupancy Inspection

Please complete and print this form, and bring it - along with a copy of your lease agreement, valid photo ID, and Fee of \$60 (cash) - to Madison City Hall. All documents required before Occupancy Permit will be scheduled. If you have any questions, please call the Building and Zoning Department, Mon-Fri 8am-4:30pm at (618) 876-8888.

Date: _____

Location: _____
Address of Property to be Occupied

Owner/Landlord's Name: _____

Owner's Phone #: _____ Owner's Cell #: _____
(Name Utilities will be in)

Head of Household: _____
First Name Last Name Phone #

Previous Address: _____

Renters/Occupants

List everyone that will live in residence. *Everyone 18 and over must have "valid" photo ID.*

First	M.I.	Last	Relationship	Age	Sex
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Total People in Household _____ Total Children _____

Ordinance #885 Article VI Section 6:033

It shall be unlawful for any person to knowingly make any false statement in his/her application for any occupancy permit as to the name, ages, relationships, or numbers of occupants who will occupy the premise or the reasons, which the respective permits are requested.

I have read the above and understand the contents and certify that I as the proposed occupant and that the answers contained herein are true and accurate in all respects to the best of my knowledge and belief. Money is NONREFUNDABLE per Ordinance #1389.

Signature of Applicant: _____

MUST BE SIGNED IN FRONT OF CLERKS AT CITY HALL OR NOTARIZED

OFFICE USE ONLY

Valid Landlord License: _____ Trash Meter #: _____ Balance Due: _____

Receipt of \$60 cash by: _____ Receipt #: _____

Number of Rooms in Unit: _____ Number of Bedrooms in Unit: _____

1st Failure: _____

2nd Failure: _____

3rd Failure \$20 Fee: _____ Approval Date: _____