



TOWN OF BROOKLINE

APPLICATION FOR CERTIFICATE OF USE EXISTING BUILDINGS

Daniel F. Bennett
Building Commissioner
(617)730-2100

DATE: _____

Certificate Number: _____ Fee: _____ Receipt: _____

Address: _____

Issue To: Owner of Building Commercial Condo Owner
 Commercial Lessee Other

Owner's Name: _____

Owner's Address: _____

Address of Person Certificate Issued to: _____
(If Different From Owner or Applicant)

Phone No: _____

Name of Commercial Lessee: _____

Commercial Condo Owner Name/Other Name: _____

D/B/A or Business Name: _____

Name of Contact Person for Inspection: _____

Phone Number: _____

Square Foot Area of Premises: _____

Proposed Use of Premises: _____

Previous Use of Premises: _____

Location of the premises within the Building: (ie, 2nd floor, basement, left or right unit)

Signature of Applicant: _____