

# CITY OF JENNINGS APPLICATION FOR CERTIFICATE OF OCCUPANCY

**VIOLATION OF THE MUNICIPAL CODE CAN RESULT IN FINES NOT EXCEEDING \$500.00 PER DAY OR IMPRISONMENT. THE CITY OF JENNINGS RESERVES THE RIGHT TO CONDUCT POST OCCUPANCY INSPECTIONS.**

Date..... APPLICATION NO.....  
(PLEASE PRINT)

Name of Head of Household..... M ..... F .....

Phone.....

Property Address..... Buy..... Purchase Price.....

Rent.....Monthly Rent.....Name of Property

Owner.....  
Your Previous Address..... Zip Code  
.....

Provide complete information for **ALL PERSONS** who will occupy the Dwelling Unit.

(Please Print)	DATE OF BIRTH	RELATIONSHIP TO HEAD OF HOUSEHOLD	PLACE OF EMPLOYMENT	SS# / DL#
Head of Household		N/A		
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

(If more space is needed, use back of page)

**IMPORTANT!! BE SURE TO READ**

**The Undersigned Understands and Acknowledges That:**  
Any changes in the use and occupancy as designated on this application without the approval of the Building Official of this City will render the Certificate of Occupancy **NULL AND VOID**. Violations of the Ordinances of this City may cause prosecution and court proceedings which may lead to fines and/or prison sentences.

The building inspection by the Building Official is **NOT A PERFORMANCE INSPECTION**. The issuing of the Certificate of Compliance or the Certificate of

Occupancy does not in any way make any guarantee or warranty to any one as to the condition of the property, structure, equipment or premises, nor does the City of Jennings assume any liabilities in the inspection and compliance therewith. Buyers should examine the property carefully and take all necessary precautions before closing. ***The Undersigned, in making application for the Certificate of Occupancy, affirms the above information is true and correct.***

**NOTARY BLOCK:** Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_.

\_\_\_\_\_  
**Applicant**

\_\_\_\_\_  
Notary Public