

G O D F R E Y

I L L I N O I S

APPLICATION FOR OCCUPANCY PERMIT			
PROPERTY INFORMATION			
Property to be inspected (circle): RENTAL LEASE OWN			
Address:			Apartment or Unit #:
City:	State:	Zip:	
APPLICANT INFORMATION			
Name:			
Mailing Address:		Phone:	
City:	State:	Zip:	
Email:			
TENANT/PURCHASER INFORMATION			
Name:			
Mailing Address:			City:
State/Zip:	Email:	Phone:	
Additional Tenants:			
<p>I, the undersigned, for the purpose of obtaining occupancy permits, will serve as a contact for code enforcement issues of any property listed and for emergency contact on the behalf of the Village of Godfrey police and fire departments. Any notice served to owner/tenant will serve the same purpose as serving me personally. I agree to conform to all ordinances of the Village of Godfrey, and will immediately update this form upon the change in status of any listed occupant or property.</p> <p>* A STATE OR GOVERNMENT ISSUED PHOTO IDENTIFICATION (DRIVER'S LICENSE, PASSPORT, ETC.) OF ANY OCCUPANT OVER THE AGE OF 18 MUST BE PROVIDED TO THE VILLAGE OF GODFREY WITHIN 21 DAYS OF CLOSING OR LEASE AGREEMENT. FAILURE TO DO SO WILL RESULT IN REVOCATION OF OCCUPANCY PERMIT AND/OR FINES. IT SHALL BE THE RESPONSIBILITY OF THE APPLICANT TO ENSURE INFORMATION IS PROVIDED. *</p>			
Signature of Applicant:			Date: