



Certificate of Occupancy / Completion.
Business License
Guidelines

A Certificate of Occupancy is a document issued by the Department of Development Services that authorizes a building or structure to be used or occupied by the proposed use upon being inspected and found to be in compliance with the requirements of the 2003 International Building Code and all other City Ordinances.

A Certificate of Occupancy is required for:

- A new building
- A new owner for an existing building, or business
- A new use, tenant, or occupancy in an existing building, or tenant space
- A remodeled, altered, or expanded building, or tenant space
- A change in name of an existing business
- A change in location of an existing business

CERTIFICATE OF OCCUPANCY APPLICATION PROCESS

The owner and/or tenant must submit a completed Certificate of Occupancy application to the Building Inspections Department. The Certificate of Occupancy will be approved and issued when construction has been completed, all departments performing inspections have given their approval and a building final has been secured from Building Inspections and the Fire Marshal's office.

1. A complete application must be submitted to the Building Inspections Department. Once all inspections have been conducted and the Certificate of Occupancy has been approved the license fee will be \$50.00.
2. A copy of driver's license or state/government issued photo I.D. is required. Additional information such as a copy of the state tax permit/certificate, warranty deed and lease/rental agreement will also need to be submitted. If no lease/rental agreement than a notarized letter from the owner giving consent to apply for a certificate of occupancy must be submitted.
3. A City Planner will review the application to identify the property's zoning district and determine if the proposed business type is an allowable use within that district. The Planner also inspects landscaping and signage to make sure it is in compliance with the City Ordinance. Please be aware that this department may take up to 3 business days to complete this review.
4. If the proposed use is not in compliance with the current zoning district, this application will be cancelled and no further inspections will be conducted. If the proposed use is in compliance with the current zoning district, you will be contacted to schedule a time and date for the Building Official and the Fire Marshal to conduct an inspection. Additional inspections by Hidalgo County Health Department will be required for food establishments. This process typically takes up to 10 business days.
5. If violations are noted during the inspection process, a correction notice will be issued.
6. A Certificate of Occupancy will be issued when all departments performing inspections have given their approval. You will be notified when your Certificate of Occupancy has been issued. You are required to post your Certificate of Occupancy in a conspicuous location.
7. Submit Fire and County Health inspections along with the application.



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PLEASE PRINT OR TYPE – INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED

Application is being made to the City of Elsa, Texas for the Certificate of the Occupancy authorizing the use of building and/or land:

Property Address: Suite:

Property legal Description Property Identification Number

Description of Business (be specific):

Business Name:

Electrical ESID # or Account No:

Email: Phone: ()

Business Owner: Phone: ()

Property Owner:

Email: Phone: ()

Address: City: State: Zip:

Hours of Operation: Number of Employees:

I own the property

I am leasing / renting the property

(Provide copy of State Tax Permit)

(Provide copy of State Tax Permit/Lease Agreement)

Type of Application (Check all that apply)

- Existing Business / New Location Name Change
New owner / New Business New Owner / Existing Business Building Expansion

Check all features of the building and/or property:

- Fire Alarm System Sand Trap Grease Interceptor/Trap
Fire Sprinkler System Swimming pool or spa Paint Booth
Standpipe System Interactive water feature Irrigation System
Hood Ansul System Above/Underground Tank(s) Backflow Devices

Check all activities which will be conducted on the premises:

Check all activities which will be conducted on the premises:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> Food or food products | <input type="checkbox"/> Hotel / Motel | <input type="checkbox"/> Petroleum Products | <input type="checkbox"/> Vehicle Parking |
| <input type="checkbox"/> Restaurant | <input type="checkbox"/> Laundry / Clean-Press | <input type="checkbox"/> Welding or cutting | <input type="checkbox"/> Auto Sales |
| <input type="checkbox"/> Grocery or convenience store | <input type="checkbox"/> Lithography / Print Shop | <input type="checkbox"/> Painting or Coating | <input type="checkbox"/> Brakes/Muffler Repair |
| <input type="checkbox"/> Alcoholic beverage sales | <input type="checkbox"/> Pet Shop | <input type="checkbox"/> Sanding, mill or woodcutting | <input type="checkbox"/> Engine Repair |
| <input type="checkbox"/> Child care center | <input type="checkbox"/> Industrial / Manufacturing | <input type="checkbox"/> Furniture Sales | <input type="checkbox"/> Auto Body Repair |
| <input type="checkbox"/> School | <input type="checkbox"/> Parts of vehicle wash | <input type="checkbox"/> Reclaiming waste materials | <input type="checkbox"/> Auto Painting |
| <input type="checkbox"/> Church | <input type="checkbox"/> Flammable / combustible liquid | <input type="checkbox"/> Outside storage | <input type="checkbox"/> State Inspection |
| <input type="checkbox"/> Office | <input type="checkbox"/> Compressed gases | <input type="checkbox"/> Items stacked higher than 12' | <input type="checkbox"/> Oil Change/Lube |
| <input type="checkbox"/> Retail | <input type="checkbox"/> Ammunition / Fireworks | <input type="checkbox"/> Tire Sales/Installation | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Medical | <input type="checkbox"/> Poisonous or hazardous | <input type="checkbox"/> Tire Storage | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Mortuary / Funeral home | <input type="checkbox"/> Chemicals or Acids | <input type="checkbox"/> Auto related business | |

I hereby certify that the information provided above is true and correct to the best of my knowledge. By signing this application, I hereby grant the City of Elsa authorization to do the background and information check(s) necessary to process this application. I also hereby grant employees of the City of Elsa, to enter the premises and conduct any inspections necessary to process this application. Alterations, changes or deviations from the plans authorized by the permit are unlawful without written authorization. The applicant hereby agrees to comply with all City Ordinances, Code, Subdivisions, Regulations, Restrictions, Local, State, and Federal Laws and assumes all responsibility for such compliance. I understand that the City of Elsa does not enforce any private restriction, covenant rule, or regulations that may be imposed. If permit becomes invalid for any reason no refunds will be issued.

I understand that erecting or placing a sign on the property, I must obtain a permit and comply with Ordinance 12-13 _____

Initial

 (Business Owner Signature) (Date)

 (Business Owner Print Name) (Date)

***** FOR OFFICIAL CITY OF ELSA USE ONLY *****

PERMITS

Application was received by: _____

- Tax Certificate Warranty Deed Lease Agreement Copy of Driver's License Or State/Government Photo I.D.

G.I.S. Property I.D. _____

Is this address correct? YES NO _____

Is the legal description correct? YES NO _____

PLANNING DEPARTMENT

NEW CONSTRUCTION

EXISTING BUILDING

- 1. Does the Zoning allow the proposed type of new business? YES NO
- 2. Will proposed business require a special permit? (C.U.P., A.B.C., etc.)? YES NO
- 3. Does the property have adequate paved off-street parking and loading facilities? YES NO
- 4. Is the landscaping adequate?
- 5. Is the address visible?
- 6. Is this signage in compliance with city ordinances?

Please note deficiencies on the inspection report:

APPROVED DENIED PENDING RE-INSPECTION _____

SIGNATURE

DATE

BUILDING SAFETY CODE COMPLIANCE

- 1. Is the building in compliance with the most current adopted building codes? ___ YES ___ NO
- 2. Are there any code compliance issues that need to be resolved prior to issuance of the Business License or Certificate of Occupancy? ___ YES ___ NO
- 3. Is the premise clean and the trash dumpster installed and in good working condition? ___ YES ___ NO

APPROVED DENIED PENDING RE-INSPECTION _____

SIGNATURE

DATE

FIRE DEPARTMENT

- 1. Does building comply with relevant fire code regulations? ___ YES ___ NO Please note deficiencies on the inspection report:

APPROVED DENIED PENDING RE-INSPECTION _____

SIGNATURE

DATE

HEALTH DIVISION

- 1. Will business be serving any consumable items?
- 2. Is a health permit required?
- 3. Are food managers / handlers' certificates required?
- 4. Is business in compliance with all / most health requirements?

Please note deficiencies on the inspection report:

APPROVED DENIED PENDING RE-INSPECTION _____

SIGNATURE

DATE

