



Residential Occupancy Application

The City of Greenville
404 S. Third
Greenville, IL 62246

Phone: 618-664-1644
Fax: 618-664-1648
Permit # _____
Fee \$25.00

Rental Property Address: _____
(one unit per application)

Type of Dwelling: Single-Family Home ___ Duplex ___ Townhouse ___ Mobile Home ___ Rooming House ___
Apartment ___ (if apartment selected, please complete next line)
of Units at this Address _____ Complex Name _____

Approx. area in Sq. Ft. _____ # of Bedrooms ___ # of Bathrooms ___ Swimming Pool Y/N Irrigation System Y/N

Applicant (if other than owner) and/or Tenant:

Name _____
Address _____
City _____ State _____ Zip _____
Home Phone _____ Cell Phone _____ Other Phone _____
Email _____
Emergency Contact (name, relationship, phone number) _____

Property Owner:

Name _____
Address _____
City _____ State _____ Zip _____
Home Phone _____ Cell Phone _____ Other Phone _____
Email _____
Emergency Contact (name, relationship, phone number) _____

Management Company (if applicable):

Name _____
Address _____
City _____ State _____ Zip _____
Home Phone _____ Cell Phone _____ Other Phone _____
Email _____
Emergency Contact (name, relationship, phone number) _____

I, the undersigned, do hereby certify that I am authorized to submit an application for the Residential Occupancy Permit. I understand no application will be processed or inspection conducted until making full payment of \$25.00 per unit (check payable to "City of Greenville"). Inspection appointments can be made by either calling 618-664-1644, extension 228 or through the Municipal Building. I am also responsible for ensuring the unit is available with all utilities turned on for inspection and that all fees are paid. Subject to all fees as approved by City Ordinances. I am responsible for having any violations corrected in order to obtain the Occupancy Permit and meet the minimum requirements as declared by City Ordinance. Failure to comply with any of the above requirements may result in a civil citation and/or fines.

Applicant Signature: _____ **Print Name:** _____ **Date:** _____

111.1 Application for appeal. Any person directly affected by a decision of the code official or a notice or order issued under this code shall have the right to appeal to the board of appeals, provided that a written application for appeal is filed within 20 days after the day the decision, notice or order was served. An application for appeal shall be based on a claim that the true intent of this code or the rules legally adopted thereunder have been incorrectly interpreted, the provisions of this code do not fully apply, or the requirements of this code are adequately satisfied by other means.