



**Community Development
Zoning Division**

18400 Murdock Circle, Port Charlotte, FL 33948-1094

Building Phone: 941.743.1201 | Fax: 941.764.4907

Zoning Phone: 941.743.1964 | Fax: 941.743.1593

Zoning@CharlotteCountyFL.gov

www.CharlotteCountyFL.gov

For Office Use Only

Permit Number

20 _____

Application Date

Zoning Tech. Signature

**APPLICATION FOR CHANGE OF OCCUPANCY (CNC)
& HOME OCCUPATION**

☐ Change of Business/Change of Use ☐ Home Based Business ☐ Same Owner/Business, Name Change Only

Address: _____					
Number & Street	Type: (St., Dr., Pkwy., Blvd., etc.,)	Unit Number	City	State	Zip
Parcel ID: _____			Number of Units in the Building: _____		
Zoning Classification of the Property: _____			Area of the Unit (sq. feet): _____		
Name of Proposed Business: _____					
Proposed Use: _____					
Name of Previous Business: _____					
Previous Use: _____					
Does the Building have 6" Street Numbers and Unit Numbers? <input type="checkbox"/> Yes <input type="checkbox"/> No Number of parking spaces for this unit: _____					
Number of accessible (ADA) parking spaces: _____ Number of parking spaces required: _____					
Is the Property on Public Sewer? <input type="checkbox"/> Yes <input type="checkbox"/> No If not on Public Sewer, must provide Health Department approval					
Any outdoor covered seating? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide the area (sq ft): _____ Generates Impact Fees					
Existing fire sprinklers? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Will there be any changes to the building for the new use? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, what kind of building changes?					
<input type="checkbox"/> Structural <input type="checkbox"/> Plumbing <input type="checkbox"/> Electrical <input type="checkbox"/> HVAC					
Existing tenant separation: <input type="checkbox"/> 1 hour firewall <input type="checkbox"/> 2 hour firewall <input type="checkbox"/> Not required <input type="checkbox"/> New firewall					
If changes provide to the building provide new floor plan, description, and permit number(s): _____					
Name of New Tenant (Person's Name): _____					
Address: _____					
Number & Street	Type: (St., Dr., Pkwy., Blvd., etc.,)	Unit Number	City	State	Zip
Email: _____			Phone Number: _____		
Property Owner(s) of Record: _____					
Address: _____					
Number & Street	Type: (St., Dr., Pkwy., Blvd., etc.,)	Unit Number	City	State	Zip
Email: _____			Phone Number: _____		

**Note: A Change of Occupancy may require the payment of impact fees if the property use is changing.
The appropriate fee, if applicable, shall be paid prior to issuance of the permit.**



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Required Forms & Documents:

- **Application:** (1 Originally signed) 2 pages
- **Building Floor Plan or Sketch:** Existing AND Proposed Floor Plans illustrating building layout with dimensions and preferably to scale, entrances/exits and door widths for exterior doors and restrooms. Label all rooms/areas within the building with the proposed use. Floor plans may be hand drawn but must accurately depict the existing and proposed use of the building/unit. It is important that any proposed changes on the proposed floor plan, include any structural, plumbing, electrical, and mechanical (AC) are shown. Please provide information on building permits submitted for those changes. Provide tenant separation information including firewalls and ratings.

NOTE: Change of Occupancy classification (change of use/CNC) must have information regarding the previous AND new use, occupant load, show compliance with Florida Building Code and life safety regulations. Plans from a licensed design professional (architect/engineer) may be required if submitted information and plans are not sufficiently detailed.

- **Parking Lot Site Plan or Sketch**
- **Signed Lease or Property Owner Consent Letter**
- Health Department form for Septic Tank, if applicable
- Charlotte County Utilities, Backflow preventer test and maintenance report, if applicable

Please read the Commercial Business Guide for Change of Occupancy Process

Please attach Site Plan of Building and Parking Lot, Building Sketch/Floor Plan, and Owner Consent Letter

NOTE: A detailed narrative explaining the Home Occupation Business is required for a Home Occupation Business. House Bill 403, F.S.599.955
A Letter of Determination from the Zoning Official is required for marijuana dispensary or substance use businesses.

Owner's Authorization/Inspection Information: If an applicant is not the property owner, the applicant must submit a notarized authorization giving the applicant the right to apply for this permit. When requesting an inspection, it is important that the inspectors will be able to gain entrance to the premise. An inspector will not go into an open building containing valuables alone. Approximately three inspectors will arrive on the scheduled day you selected to perform the following inspections: Electric, Fire, Zoning and Charlotte County Utility (CCU), if applicable.

Affidavit of Applicant

I, the undersigned, being duly sworn, depose and say that I am the owner, attorney-in-fact, agent, lessee or representative of the owner(s) of the majority of the property described and which is the subject matter of the proposed application; that all answers to the questions in this application, and all sketches, data and other supplementary matters attached to and made a part of the application are honest and true to the best of my knowledge and belief. **I understand this application must be complete and accurate** before the application may be considered, **and that if I am not the owner of the property, I must obtain a notarized authorization letter from the owner(s)**

Under penalties of perjury, I declare that I have read the foregoing document and that facts stated are true, correct and in compliance with the applicable regulations. F.S.92.525

Applicant's Signature: _____

Date: _____

Applicant's Printed Name: _____



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Commercial Business Guide: Commercial Name Change (CNC) or Change of Occupancy

Charlotte County is “Open for Business!” It’s a great place to own and operate one and we want to help you succeed. Like every local government, we have rules and regulations that business owners must follow. This guide’s purpose is to answer the most commonly asked questions that one may have when starting a new business. By using this guide, the process will be easier.

STEP 1: Before signing the lease, please verify zoning and building regulations.

Please make yourself aware of what is, and is not, allowed for the business you are going to operate by checking on zoning district regulations. Each zoning district has different requirements. Commercial General (CG) is the most restrictive of the zoning classifications, which has special regulations regarding outdoor display of merchandise and may not allow certain types of businesses. Additionally, some properties are within Overlay Zones and Development of Regional Impact (DRIs) which have additional regulations to comply with.

To verify the zoning district and if the business is allowed, please contact the Zoning Department at 941.743.1964 or Zoning@charlottecountyfl.gov. If you already know the zoning district and want to review the allowable uses, please visit Charlotte County’s website at www.CharlotteCountyfl.gov, Click [Code of Laws & Ordinances](#). The Zoning Ordinance is [Chaper 3-9](#) of the code.

STEP 2: Verify Sewer or Septic Tank Service. This is to be completed with the [Florida Department of Health](#) and [Florida Department of Environmental Protection \(DEP\)](#). If the building is served by a septic tank, please provide evidence of Health Department approval.

If connected to [Charlotte County Utilities](#) a [Backflow Preventer Test and Maintenance Report](#) may be needed. Contact Charlotte County Utilities to inquire if this is needed.

STEP 3: Apply for a CNC (Commercial Name Change) permit (a.k.a “Change of Occupancy”).


This permit/process is required for any business that is about to occupy a new building or location. The process is also required by the Florida Building Code (FBC). The Change of Occupancy Application form can be found on Charlotte County’s website within Community Development Forms & Documents in the Zoning dropdown list named [“Application for Change of Occupancy”](#).

- ☐ Pay the application fee of \$101.00.
- ☐ Application form completed. Page 2 must be signed.
- ☐ Attach a building floor plan or sketch, both current and proposed as requested in the application form.
- ☐ Attach a parking lot site plan or sketch.
- ☐ Attach a copy of the property owner’s consent letter (if rented).

STEP 4: Application Review & Approval

The following are part of the CNC/Change of Occupancy application review and inspection process:

- **Zoning Review:**
 - o Review that the business is permitted in the proposed Zoning District.
 - o Review if any impact fees are required to be paid.
- **Building Construction Division Review:**
 - o Review for compliance with Florida Building Code for life safety and accessibility.
 - o Review that any alterations have been performed with the required permit(s).
 - o If there is a change of owner, but not change of use (same business to remain) no building review is required.

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- **Fire/EMS Review:**

- Review for compliance with National Fire Prevention Code (NFPA) requirements.

STEP 5: Issuance of CNC Permit and Scheduling & Passing of Inspections:

Once the CNC is issued, visit/contact the Tax Collector's Office to apply for your Business Tax Receipt (BTR). Next, if ready, schedule applicable inspections. (See the permit's Job Card for the list of required inspections).

- **Zoning/Code Compliance Inspector – Zoning Final Inspection:**

- Verification that the street numbers are properly posted on the building and unit numbers (if applicable) are posted on the door.
- Verification that the parking meets Zoning and FBC requirements and signage is present.
- Verification that the business has obtained a current BTR from the Tax Collector's Office.
- Verification that there are no unpermitted or prohibited signs or banners installed.

- **Fire Inspector – Fire Commercial Change of Occupancy Inspection:**

- Verification that the type of occupancy proposed is correct.
- Verification that the exit(s) and other doors are accessible and operational.
- Verification that the exit light(s) and emergency lighting are operational.
- Verification that fire alarms and/or fire sprinklers (if required) are operational and certified.
- Verification that extinguishers/extinguishing systems are in place, operational and certified (if required).
- Verification that applicable requirements for daycare centers/health care centers are met (where applicable).
- Verification of the presence of exit signs and emergency lights. The need for these is determined by the requirements of the NFPA (National Fire Protection Association). The determination is made at the time of the inspection with no penalty to the applicant.
- At the time of inspection, the occupant will be notified if any other code compliance will be required according to the type of use.

- **Electrical Inspector – Electrical Final Inspection:**

- Verification that the electrical system meets code and verify no work has been completed without permits first being obtained.
- Verification that the existing electrical system is safe for the employees and customers.

- **Charlotte County Utilities Inspector – CCU Backflow Preventor Final (if required):**

- Tests the backflow assembly.

STEP 6: Obtain your Certificate of Occupancy.

After all inspections have passed, contact the Zoning Department to obtain your Certificate of Occupancy (C.O.).

IMPORTANT CONTACTS

Zoning Section: 941.743.1964

Building Construction Division: 941.743.1201, press option "5"

Code Compliance Section: 941.743.1201, press option "2"

Charlotte County Utilities: 941.764.4589

Tax Collector's Office: 941.743.1350 or 941.681.3710

Florida Department of Health for Charlotte County: 941.624.7200



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PROPERTY OWNER'S CONSENT

RE: Letter of Consent for Change of Occupancy (a.k.a Commercial Name Change – CNC)

To Whom it May Concern:

I, _____ property owner of
Property Owner's Name

Number & Street

Type: (St., Dr., Pkwy., Blvd., etc.,)

Unit Number

City

State

Zip

am hereby authorizing consent to _____
Tenant's Name

which is required by the Change of Occupancy application.

Owner's Signature: _____

State of _____, County of _____

The foregoing instrument was acknowledged before me, by means of physical presence ____ or
online notarization ____, on ____ day of _____, 20____, by
_____ who is personally known to me ____ or who has
produced _____ as identification and who did ____/did not
_____ take an oath.

Notary Signature: _____ Notary Stamp: