This form may be emailed, mailed, or submitted in person.



DEVELOPMENT SERVICES DEPARTMENT

Permits and Inspections Division

1522 Texas Parkway, Missouri City, TX 77489 Phone (281) 403-8600 • www.missouricitytx.gov developmentservices-psr@missouricitytx.gov

COMMERCIAL CHANGE OF OCCUPANT

Allow Up To Seven (7) Business Days for the Review of This Document

Name of Proposed Business	
Subdivision (if any)	Name of Shopping Ctr.
Zip	Phone
Zip	Business Phone
exact name you have given	n to Electrical Provider)
Occupancy Group (Of	ffice Use Only)
Occupancy Group (Of	fice Use Only)
Iove-In N	lumber of Employees
eation? Yes or No (please	circle one)
CTIVITIES)	
t Number E-1	mail Address
	FICE USE ONLY:
\$75 General Elect	tric Only (Owner Name Change)
PSR	Date
	ertificate of Zoning Compliance
Planning Approval	Date
D.S. Director	Date Revised 06-02-2020
	Subdivision (if any) Zip Zip Exact name you have given Occupancy Group (Of Occupanc