

**CLEARANCE FORM**

DATE: \_\_\_\_\_

NAME OF BUSINESS: \_\_\_\_\_

TYPE OF BUSINESS: \_\_\_\_\_

LOCATION OF BUSINESS: \_\_\_\_\_

To obtain a privilege license, the following items(s) must be signed and dated by the appropriate person from each department before utilities can be release.

1. PLANNING DEPARTMENT:                      PROPERTY IS ZONE \_\_\_\_\_  
This business used is allowed in a \_\_\_\_\_ zone, and property is in compliance with  
The Zoning Ordinance for the City of Amory.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PLANNING/ZONING ADMINISTRATOR

2. Change of Occupancy required:              NO \_\_\_\_\_ YES \_\_\_\_\_

\_\_\_\_\_  
DATE

\_\_\_\_\_  
BUILDING INSPECTOR

3. CITY CLERK;  
Privilege license has been obtained from the City Clerk's Office.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
CITY CLERK OR OFFICE PERSONNEL

4. UTILITIES DEPARTMENT:  
All Departments have been signed off, and business is cleared for utility service.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
OFFICE PERSONNEL

This form must be filed in the City Clerk's Office with privilege license application.

**Attachment to Clearance Form  
For Privilege License**

**SCOPE OF OCCUPANCY**

**Name of Business:** \_\_\_\_\_

**Address of Business:** \_\_\_\_\_

**Type of business activity:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Days of week and hours of day/night of business operations:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Maximum number of employees on shift of highest employment:** \_\_\_\_\_

**Other information:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Signature of authorized representative**

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date