

CITY OF MESQUITE

CERTIFICATE OF OCCUPANCY APPLICATION

Notice to Applicant: Any Certificate of Occupancy issued on the basis of incorrect information may be revoked.
(PLEASE PRINT)

Address of Use 920 S.H. 352 #300

Name of Business (DBA) MESQUITE CARE PHARMACY

Proposed Use (s) PHARMACY Square Footage 1750

Do you intend to sell: 1. Any used merchandise? Yes No If yes, what percentage? ___ %
2. Beer or wine? Yes No
(Off-premises consumption)

Owner / Tenant Information: VARGHESE VARKEY
8919 WESTMONT DR. Name

Non-Business Mailing Address IRVING, TX 75063 City State Zip
972-768-8578 E-mail Address Telephone #

By signing this application, I request that the City of Mesquite issue me and/or my business a revocable Certificate of Occupancy to conduct specified uses on the above-described premises. I declare that the uses listed above represent ALL uses, which shall be conducted on the premises, and I understand that additional uses may not take place without my applying for, and receiving, an amended Certificate. I understand further that if this application is approved, the Certificate holder is responsible for abiding by all laws, ordinances and regulations of the City of Mesquite, and that the Certificate holder will maintain in perpetuity the terms, conditions and covenants of any site plan affecting the premises and remove any nonconforming signage as required by ordinance.

→ I agree. [Do not sign this application unless you agree.]
→ I acknowledge receipt of "Phasing Out Existing Pole Signs." [Do not sign this application unless you have been given this document.]

Mark E. Abel 3-24-17
Signature of Owner Date

OFFICE USE ONLY

Comments: _____

1. Planning & Zoning Comments: _____ Signature / Date LA/3-24-17
(Reviewed for use and CAM compliance only)
2. City Engineer Comments: _____ Signature / Date
3. Food Service Comments: _____ Signature / Date
4. Fire Comments: _____ Signature / Date
5. Building Inspection Comments: _____ Signature / Date
6. Parks & Recreation Comments: _____

Zoning GR+LC CAM? perm# 55909 Signature / Date
Occupancy Group M Send to Health? Yes No Date 3-24-17
Type of Construction FB Copy to Ron Self? Yes No Fee _____
Will Call for Inspection: Yes No Inspection Date Requested: _____

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3267 Karlar Drive Mesquite, Texas 75150
Address of Use

Salon MP
Name of Business (DBA)

Proposed Use (s) Unisex Hair Salon Square Footage 940 square

Do you intend to sell: 1. Any used merchandise? Yes No If yes, what percentage? ___%
2. Beer or wine? Yes No
(Off-premises consumption)

Owner / Tenant Information: Martha Pena

3305 Shorewood Rd Name
Non-Business Mailing Address
Mesquite Texas 75150 469 632 6582
City State Zip Telephone #

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[Signature] 3-24-17
Signature of Owner Date

OFFICE USE ONLY

Comments: _____

① Planning & Zoning Comments: _____ LD/3-24-17
(Reviewed for use and CAM compliance only) Signature / Date

2. City Engineer Comments: _____ Signature / Date

3. Food Service Comments: _____ Signature / Date

④ Fire Comments: _____ Signature / Date

⑤ Building Inspection Comments: _____ Signature / Date

6: Parks & Recreation Comments: _____ Signature / Date

Zoning NGTC CAM?
Occupancy Group B Send to Health? Yes No
Type of Construction FB Copy to Ron Self? Yes No
Will Call for Inspection: Yes No
Receipt No. B43356
Date 3/24/17
Fee 0700
Inspection Date Requested: 9/31/2017

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Notice to Applicant: Any Certificate of Occupancy issued on the basis of incorrect information may be revoked.
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Address of Use: Family Cathedral of Praise Bldg 2B
790 Windbell Cir Bldg 2B
 Name of Business (DBA): _____

Proposed Use (s) Portable Classroom Square Footage 1,536

Do you intend to sell: 1. Any used merchandise? Yes No If yes, what percentage? ___ %
 2. Beer or wine? Yes No
(Off-premises consumption)

Owner / Tenant Information: Harry Sewell
Name

7706 Kings Ct
Non-Business Mailing Address
Roulett TX 75089 Harry (972) 896-5222
City State Zip E-mail Address Telephone #

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[Signature] 3/27/17
Signature of Owner Date

OFFICE USE ONLY

Comments: _____

1. Planning & Zoning Comments: _____
(Reviewed for use and CAM compliance only) [Signature] 3/28/17
Signature / Date
2. City Engineer Comments: _____
Signature / Date
3. Food Service Comments: _____
Signature / Date
4. Fire Comments: _____
Signature / Date
5. Building Inspection Comments: _____
Signature / Date
6. Parks & Recreation Comments: _____

Zoning PD-ME/R3 CAM?
 Occupancy Group E Send to Health? Yes No
 Type of Construction EB Copy to Ron Self? Yes No
 Will Call for Inspection: Yes No
 Inspection Date Requested: bidg perm

perm# 560012
 Receipt No. _____
 Date 3-28-17
 Fee _____

* go to # 100 for key *

Released: _____
Entered: _____
Mailed: _____
Scanned: _____

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Address of Use 502 W. Kearney St Suite 500 Mesquite TX 75149

Name of Business (DBA) Texas Financial

Proposed Use (s) Multi-Service Square Footage 700

Do you intend to sell: 1. Any used merchandise? Yes No If yes, what percentage? ___ %
2. Beer or wine? Yes No
(Off-premises consumption)

Owner / Tenant Information: Miguel C. Salinas & Merida Salinas

Non-Business Mailing Address 530 W. Kearney St Name _____
Mesquite TX 75149 City State Zip
469 503 3485 Telephone #

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Miguel Salinas Signature of Owner 03/28/17 Date

-NO LOANS

OFFICE USE ONLY

Comments: SIC 7291 Tax Preparation Services + Notary

1. Planning & Zoning Comments: _____
(Reviewed for use and CAM compliance only) Miguel Salinas Signature / Date 3/28/17
2. City Engineer Comments: _____
Signature / Date
3. Food Service Comments: _____
Signature / Date
4. Fire Comments: _____
Signature / Date
5. Building Inspection Comments: _____
Signature / Date
6. Parks & Recreation Comments: _____
Signature / Date

Zoning PD-4045 Office CAM?
Occupancy Group B Send to Health? Yes No
Type of Construction IFB Copy to Ron Self? Yes No
Will Call for Inspection: Yes No
Receipt No. BUL110
Date 3-28-17
Fee 100
Inspection Date Requested: 3-31-17

* go to # 100 for key *

CITY OF MESQUITE

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Address of Use 790 Windbell Cir Bldg 2A

Name of Business (DBA) Family Cathedral of Praise

Proposed Use (s) Portable Classroom Square Footage 1536

Do you intend to sell: 1. Any used merchandise? Yes No If yes, what percentage? ___%
2. Beer or wine? Yes No
(Off-premises consumption)

Owner / Tenant Information: Harry Sewell
Name
7706 Kings Ct
Non-Business Mailing Address
Rowlett, TX 75089
City State Zip Telephone #

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[Signature] 3/27/17
Signature of Owner Date

OFFICE USE ONLY

- Comments: _____
1. Planning & Zoning Comments: _____
(Reviewed for use and CAM compliance only) [Signature] 3/28/17
Signature / Date
 2. City Engineer Comments: _____
Signature / Date
 3. Food Service Comments: _____
Signature / Date
 4. Fire Comments: _____
Signature / Date
 5. Building Inspection Comments: _____
Signature / Date
 6. Parks & Recreation Comments: _____
Signature / Date

Zoning PD-MF & R-3 AM?

Occupancy Group E Send to Health? Yes No

Type of Construction FB Copy to Ron Self? Yes No

Will Call for Inspection: Yes No

perm # 510012 Receipt No. 3-28-17 Signature / Date
Date 3-28-17
Fee _____
Inspection Date Requested: bdg perm

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2001 Military Parkway
 Address of Use

Wilmington Neighborhood Market Fuel Station
 Name of Business (DBA)

Proposed Use (s) Fuel / convenience Sales Square Footage 754

Do you intend to sell: 1. Any used merchandise? Yes No If yes, what percentage? ___%
 2. Beer or wine? Yes No
(Off-premises consumption)

Owner / Tenant Information: Kimberly Pennington
Name

2001 SE 10th St
 Non-Business Mailing Address

Bentonville, AR 72716 479-544-7932
City State Zip Telephone #

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[Signature] 3-27-17
 Signature of Owner Date

OFFICE USE ONLY

Comments: _____

1. Planning & Zoning Comments: BQ approved 03-24-17
(Reviewed for use and CAM compliance only) Signature / Date
2. City Engineer Comments: _____
 Signature / Date
3. Food Service Comments: _____
 Signature / Date
4. Fire Comments: _____
 Signature / Date
5. Building Inspection Comments: _____
 Signature / Date
6. Parks & Recreation Comments: _____
 Signature / Date

Zoning I CAM?
 Occupancy Group M Send to Health? Yes No
 Type of Construction VB Copy to Ron Self? Yes No
 Will Call for Inspection: Yes No Inspection Date Requested: will call

Receipt No. Permit #5522
 Date 3/28/17
 Fee _____

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Address of Use 1951 Military Parkway

Name of Business (DBA) Walmart Neighborhood Market #5824

Proposed Use (s) Grocery Store / Pharmacy Square Footage 41511

Do you intend to sell: 1. Any used merchandise? Yes No If yes, what percentage? ___%
2. Beer or wine? Yes No
(Off-premises consumption)

Owner / Tenant Information: Kim Pendergraph (Walmart CM)
2001 SE 10th St
Name

Non-Business Mailing Address Bentonville, AR 72716 E-mail Address 479-544-7932
City State Zip Telephone #

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[Signature]
Signature of Owner Date

OFFICE USE ONLY

Comments: _____

1. Planning & Zoning Comments: BQ approved 03-24-17 [Signature]
(Reviewed for use and CAM compliance only) Signature / Date
2. City Engineer Comments: _____ Signature / Date
3. Food Service Comments: _____ Signature / Date
4. Fire Comments: _____ Signature / Date
5. Building Inspection Comments: _____ Signature / Date
6. Parks & Recreation Comments: _____ Signature / Date

Zoning I CAM?
Occupancy Group M Send to Health? Yes No
Type of Construction IB Copy to Ron Self? Yes No
Will Call for Inspection: Yes No
Receipt No. Permit # 55222
Date 3/28/17
Fee 0
Inspection Date Requested: will call

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Address of Use 2517 Franklin Ste E. Mesquite TX 75150

Name of Business (DBA) Forever Fit

Proposed Use (s) Office Square Footage 1,200 FT

Do you intend to sell: 1. Any used merchandise? Yes No If yes, what percentage? %
2. Beer or wine? Yes No
(Off-premises consumption)

Owner / Tenant Information: Sandra Vales Name

Non-Business Mailing Address 2824 Belhaven Dr E-mail Address

Mesquite Tx 75150 City State Zip Telephone #

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Sandra Vales Signature of Owner 03-28-17 Date

OFFICE USE ONLY

Comments: _____

① Planning & Zoning Comments: Darrell Zepf 3/28/2017
(Reviewed for use and CAM compliance only) Signature / Date

2. City Engineer Comments: _____ Signature / Date

3. Food Service Comments: _____ Signature / Date

④ 4. Fire Comments: _____ Signature / Date

⑤ 5. Building Inspection Comments: _____ Signature / Date

6. Parks & Recreation Comments: _____ Signature / Date

Zoning C CAM?

Occupancy Group B

Type of Construction IB

Will Call for Inspection: Yes No

Send to Health? Yes No

Copy to Ron Self? Yes No

Receipt No. B43360

Date 3/28/17

Fee 100.40

Inspection Date Requested: 3/31/17

Released: _____
Entered: _____
Mailed: _____
Scanned: _____

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Address of Use 2063 TOWN EAST MALL, SPACE 206B, MESQUITE, TX 75150

Name of Business (DBA) SK JANG, Inc. dba JS BOUTIQUE

Proposed Use (s) WOMEN'S HANDBAGS, PURSES, AND ACCESSORIES Square Footage 2,232

Do you intend to sell: 1. Any used merchandise? Yes No If yes, what percentage? ___ %
2. Beer or wine? Yes No
(Off-premises consumption)

Owner / Tenant Information: SUNG KWON JANG
Name

441 ARBOL, IRVING, TX 75039
Non-Business Mailing Address

E-mail Address _____
Telephone # (214) 554-0904

City _____ State _____ Zip _____

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Sung Kwon Jang 3/29/17
Signature of Owner Date

OFFICE USE ONLY

Comments: _____

1. Planning & Zoning Comments: _____
(Reviewed for use and CAM compliance only) [Signature] 3/29/17
Signature / Date

2. City Engineer Comments: _____
Signature / Date

3. Food Service Comments: _____
Signature / Date

4. Fire Comments: _____
Signature / Date

5. Building Inspection Comments: _____
Signature / Date

6. Parks & Recreation Comments: _____
Signature / Date

Zoning C/TERRA CAM?

Occupancy Group m

Type of Construction IB

Will Call for Inspection: Yes No

Send to Health? Yes No

Copy to Ron Self? Yes No

Receipt No. 01122
Date 3-29-17
Fee 100
Inspection Date Requested: 4-1-17

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Address of Use 1815 N Galloway ave #B Mesquite, TX 75149

Name of Business (DBA) The Abundant Life Church of Jesus Christ

Proposed Use (s) Church Square Footage 2800

Do you intend to sell: 1. Any used merchandise? Yes No If yes, what percentage? _____ %
2. Beer or wine? Yes No
(Off-premises consumption)

Owner / Tenant Information: Willie Frazier
Name

1337 Natchez trace
Non-Business Mailing Address

Mesquite TX 75149 City State Zip
469 731 3642 E-mail Address Telephone #

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Willie Frazier 3-30-17
Signature of Owner Date

OFFICE USE ONLY

Comments: _____

① Planning & Zoning Comments: Murphy Zuber 3/29/2017
(Reviewed for use and CAM compliance only) Signature / Date

2. City Engineer Comments: _____
Signature / Date

3. Food Service Comments: _____
Signature / Date

④ Fire Comments: _____
Signature / Date

⑤ Building Inspection Comments: _____
Signature / Date

6. Parks & Recreation Comments: _____
Signature / Date

Zoning THN CAM?

Occupancy Group A-3

Type of Construction FB

Will Call for Inspection: Yes No

Send to Health? Yes No

Copy to Ron Self? Yes No

Receipt No. 041721
Date 3-29-17
Fee 100
Inspection Date Requested: 4-3-17