

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)

2417 GUS THOMASSON STE: 103
Address of Use _____
CASTILLO DEL REY
Name of Business (DBA) _____
Proposed Use (s) STORAGE Square Footage 3,000

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: PABLO ELIAS FERRAMA
Name _____
2417 GUS THOMASSON Ste. 105
Non-Business Mailing Address _____
Mesquite Tx 75150 (469) 203-0660
City State Zip 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.]

[Signature] 03/31/2017
Signature of Owner Date

OFFICE USE ONLY

Comments: Storage for abutting church use only. RE

1. Planning & Zoning Comments: _____
(Reviewed for use and CAM compliance only) [Signature] 4/13/17
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 GR CAM?
Occupancy Group SH Send to Health? Yes No
Type of Construction IB Copy to Ron Self? Yes No
Will Call for Inspection: Yes No
Receipt No. BL3393
Date 4/13/17
Fee 100.00
Inspection Date Requested: 4/10/17

Distribution: White - Building Inspection Yellow - Inspector Pink - Fire Department

CITY OF MESQUITE

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Address of Use 621 Old London Ln.
Name of Business (DBA) Iglesia Nueva Vision Inc.
Proposed Use (s) church Square Footage 56,000

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: Rosa Gomez
Name

805 E. Vista Dr.
Non-Business Mailing Address
City Garland State TX Zip 75041 E-mail Address 409-544-2421
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.

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Rosa Gomez 4/13/17
Signature of Owner Date

OFFICE USE ONLY

Comments: _____

① Planning & Zoning Comments: _____
(Reviewed for use and CAM compliance only) [Signature] 4/13/17
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 R-3 CAM?
Occupancy Group A3 Send to Health? Yes No
Type of Construction SB Copy to Ron Self? Yes No
Will Call for Inspection: Yes No
Receipt No. BU3395
Date 4/13/17
Fee 100.00
Inspection Date Requested: 4/10/17

CITY OF MESQUITE

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(PLEASE PRINT)

Address of Use: 1228 W. Scyene Road, #212, Mesquite, TX 75149
 Name of Business (DBA): Seranthood-Hope-Integrity-Persistence
 Proposed Use (s): Office Square Footage: 1000

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: Lynnette Edic
3316 Elder Court Irving TX 75060
Name
 City: Irving State: TX Zip: 75060 Telephone #: 972.891.5186
Non-Business Mailing Address E-mail Address

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.

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

Lynnette Edic 4/11/2017
 Signature of Owner Date

OFFICE USE ONLY

Comments: _____

1. Planning & Zoning Comments: _____
(Reviewed for use and CAM compliance only) [Signature] 4/13/17
 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/MP-SC CAM?

Occupancy Group B

Type of Construction FB

Will Call for Inspection: Yes No

Send to Health? Yes No

Copy to Ron Self? Yes No

Receipt No. B43394

Date 4/13/17

Fee 100.00

Inspection Date Requested: 4/10/17

CITY OF MESQUITE

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

Address of Use: 1305 Eulane Dr Mesquite TX 75149

Name of Business (DBA): Word of Life Church Mesquit

Proposed Use (s): Church / Daycare Square Footage 3,000

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: Morris D. Jackson

Non-Business Mailing Address: 1305 Eulane Dr Mesquite TX 75149
City: Mesquite State: TX Zip: 75149 E-mail Address: 469-867-7023

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.

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Morris D. Jackson 4-11-2017
Signature of Owner Date

OFFICE USE ONLY

Comments: SIC 866 Daycare with church is permitted

1. Planning & Zoning Comments: Barrett 3/24/17 4/11/2017
(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 R-3 CAM?

Occupancy Group AS

Type of Construction IR

Will Call for Inspection: Yes No

Send to Health? Yes No

Copy to Ron Self? Yes No

Receipt No. BK3319

Date 4/11/17

Fee 100.00

Inspection Date Requested: 4/14/17

CITY OF MESQUITE

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(PLEASE PRINT)

Address of Use 18601 LBJ ERWY SUITE 215 MESQUITE 75150

Name of Business (DBA) GRETA STOGNER INSURANCE AGENCY

Proposed Use (s) OFFICE Square Footage 1072

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: GRETA STOGNER INSURANCE AGENCY
PO BOX 870057 MESQUITE, TX 75187
Name E-mail Address

Non-Business Mailing Address 972 686-4100
Telephone #

City _____ State _____ Zip _____ Telephone # _____

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[Signature] 4/11/2017
Signature of Owner Date

OFFICE USE ONLY

Comments: _____

1. Planning & Zoning Comments: _____
(Reviewed for use and CAM compliance only) [Signature] 4/11/17
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 B Send to Health? Yes No

Type of Construction IIB Copy to Ron Self? Yes No

Will Call for Inspection: Yes No

Receipt No. BU1748
Date 4-11-17
Fee 100
Inspection Date Requested: 4-14-17

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Address of Use 3527 E. Hwy 80 Mesquite TX 75111

Name of Business (DBA) Go food mart

Proposed Use (s) Gas station / convenience store Square Footage 1500

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: Suresh Shetty
Name

Non-Business Mailing Address 2131 N Kirbywood Tr. TX 75052 City State Zip
E-mail Address 817-715-3907 Telephone #

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[Signature] Signature of Owner
04-12-17 Date

OFFICE USE ONLY

Comments: _____

1. Planning & Zoning Comments: max. 48 liners BQ approved 11-10-11 2/4-12-17
(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 SS CAM?
Occupancy Group M Send to Health? Yes No
Type of Construction EB Copy to Ron Self? Yes No
Will Call for Inspection: Yes No
Receipt No. N/A
Date 4-12-17
Fee no fee per City
Inspection Date Requested: 4-17-17

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Address of Use: 2764 I-30 IH 30

Name of Business (DBA): CAMPING WORLD RV SALES, LLC

Proposed Use (s): RV DEALERSHIP Square Footage: 6300

Do you intend to sell: 1. Any used merchandise? Yes No If yes, what percentage? 15%
2. Beer or wine? Yes No
(Off-premises consumption)

Owner / Tenant Information: SILAS BRYAN
Name

Non-Business Mailing Address: 4713 LAS LOMAS
City: MESQUITE State: TX Zip: 75150 Telephone #: (214) 923-9003

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Silas A. Bryan, Jr. 4/11/17
Signature of Owner Date

OFFICE USE ONLY

Comments: Legal Non-conforming

- ① Planning & Zoning Comments: _____
(Reviewed for use and CAM compliance only) [Signature] 4/12/17
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 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. 1343387
Date 4/12/17
Fee 100.00
Inspection Date Requested: 4/17/17

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4445 Interstate 30, Mesquite, TX 75150
Address of Use

SKY Interests 4445 I-30, LLC
Name of Business (DBA)

Proposed Use (s) ~~office/warehouse shell~~ Square Footage 41,000

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: SKY Interests
106 E. Rockwell Property Managers Monica Rice
Non-Business Mailing Address
Rockwell TX 75087
E-mail Address 972-771-7577
City State Zip Telephone #

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Signature of Owner _____ Date 4/7/17

OFFICE USE ONLY

- Comments: _____
1. Planning & Zoning Comments: _____
(Reviewed for use and CAM compliance only) *[Signature]* 4/7/17
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 C CAM?
Occupancy Group Shell Send to Health? Yes No
Type of Construction IB Copy to Ron Self? Yes No
Will Call for Inspection: Yes No
Receipt No. BU17142
Date 4-7-17
Fee 100.00
Inspection Date Requested: 4-12-17

Distribution: (White - Building Inspection Yellow - Inspector Pink - Fire Department)

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Address of Use 2929 North Galloway Ave Mesquite TX 75150 suite 101

Name of Business (DBA) C Store

Proposed Use (s) C store (convenience store) - gasoline sales Square Footage 3000

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: MARIA NERICCIO

Name 1109 Hillcrest St ... 703

Non-Business Mailing Address Mesquite TX 75149 E-mail Address 214-646-7897

City _____ State _____ Zip _____ Telephone # _____

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Maria Nericcio 4-7-17
Signature of Owner / Date

OFFICE USE ONLY

Comments: No game machines

1. Planning & Zoning Comments: Marnett A Zford 4/7/2017
(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 GR CAM?

Occupancy Group M Send to Health? Yes No

Type of Construction EB Copy to Ron Self? Yes No

Will Call for Inspection: Yes No

Receipt No. B43375
Date 4/7/17
Fee 100
Inspection Date Requested: 4/12/17

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2533 FRANKLIN DR SK 13B
Address of Use

UNILINK WIRE AND CABLE INC
Name of Business (DBA)

Proposed Use (s) office Warehouse Square Footage 1020

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: Robert Morgan
Name
981 W. Cartwright Rd Apt 103
Non-Business Mailing Address
Mesquite, TX 75149 972-844-0222
City State Zip 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.

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Robert Morgan 04/07/2017
Signature of Owner Date

OFFICE USE ONLY

- Comments: _____
1. Planning & Zoning Comments: _____
(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 C CAM?

Occupancy Group B Send to Health? Yes No

Type of Construction IB Copy to Ron Self? Yes No

Will Call for Inspection: Yes No

Receipt No. BUT 1014
Date 4-7-17
Fee 100
Inspection Date Requested: 4-12-17

Distribution: White - Building Inspection Yellow - Inspector Pink - Fire Department

CITY OF MESQUITE

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Address of Use 2250 Memorial W. Scyene Rd.
 Name of Business (DBA) Middle School #9
 Proposed Use (s) Education Classrooms
Cafeteria, Gym, etc Square Footage 193,000

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: Mesquite ISD
Name
3819 Towne Crossing Blvd.
Non-Business Mailing Address
Mesquite, Tx 75150 (972) 882-7386
City State Zip E-mail Address Telephone #

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CW "Buddy" Ennis 3-7-17
Signature of Owner Date
CW "Buddy" Ennis

OFFICE USE ONLY

Planning will sign after plat is filed

 Signature / Date

 Signature / Date

 Signature / Date

4. Fire Comments: _____
 Signature / Date
 5. Building Inspection Comments: _____
 Signature / Date
 6. Parks & Recreation Comments: _____
 Signature / Date

Zoning R-3/SF CAM?
 Occupancy Group E Send to Health? Yes No Receipt No. _____
 Type of Construction ILB Copy to Ron Self? Yes No Date _____
 Will Call for Inspection: Yes No Fee _____
 Inspection Date Requested: _____