



Mashantucket Pequot Tribal Nation
Land Use Commission
 P.O. Box 3202
 Mashantucket, CT 06338-3202

**REQUEST FOR
OCCUPANCY OR USE**

Type of Certificate Requested:

**Requested Duration:
(If Temporary)**

Project Title:

LUC#:

Project Location:

Land Use Permit Applicant:

Name:

Organization:

Address:

Phone:

Cell:

Email:

Site Contact:

Name:

Organization:

Phone:

Cell:

Email:

Applicant Certification:

Please Check All Applicable Statements

I am the Applicant

I am the Site Contact

I am:

I certify that:

The project substantially meets the requirements and conditions of the Land Use Permit issued.

No Land Use Fee balance is owed due to a Significant Change in the Total Cost of the Activity.

All closeout documents, including Record Drawings have been provided to the owner.

Information provided with application is true and correct to the best of my knowledge.

At this time I am only seeking a partial certificate for the portion of the activity described below:

Submittal Attachments *(please check all provided):*

Certificate of Substantial Completion from the Design Professional in Responsible Charge.

A copy of the punchlist and evidence that each item has been completed or otherwise resolved.

Record Drawings in conformance with MPTN Record Drawing Standards.