



Certificate of Occupancy Request

I (we), _____
Hereby request a Certificate of Occupancy be issued for (building address and suite number):

Business owners' name, address and phone number: _____

Square footage of building or tenant space for this occupant:

1. Specify the square footage for each use: (e.g., 800 square feet of office, 1,200 square feet of manufacturing): _____
2. Describe how the space will be used: (e.g., I plan to fabricate components for and assemble cabinets.) _____
3. Include a description of items to be assembled, manufactured, stored or sold within the space: _____
4. Maximum number of employees during any shift: _____
5. Complete and attach a Hazardous Materials Checklist.

Office Use Only

Occupancy Group: _____ Area: _____

Type of Construction: _____ Fire Sprinklers: _____

Occupancy Separation Requirement: _____

Hazardous Material form completed and attached: YES / NO

Meter Release fee paid : YES / NO Release date: _____

Approvals: Sanitation: _____
 Planning: _____
 Health: _____
 Fire: _____
 Building: _____

Initials of issuing Permit Technician: _____