TEMPORARY-CONDITIONAL-PARTIAL
CERTIFICATE OF OCCUPANCY REQUEST

Building Permit Number: #____________________
Building Address: ____________________________________________________________
Parcel Id # __________________________________________________________________

Dear Building Official:
The undersigned requests a temporary-conditional-partial Certificate of Occupancy for a period
not to exceed ______ days.

Requirements for the execution of this Temporary Certificate of Occupancy:
1. All fees paid
2. All final inspections performed and all life safety provisions passed.

I understand that if the above request is granted, a temporary Certificate of Occupancy will be
given for the period of time stated above. I also understand that if the time limit is exceeded, I
may be subject to a Code Enforcement Department violation.

Specific Reason(s) for Temporary Certificate of Occupancy:
____________________________________________________________________________
____________________________________________________________________________

Name ________________________________ Date ______________
Print Name of Owner or Contractor ________________________________
Signature of Owner or Contractor _________________________________

To be completed by Building Official only

Approved? ___ Yes ___ No

Time period of Temporary Certificate of Occupancy _________Days

By: ________________________________ Date ______________

Comments_____________________________________________________________________

Building Permits & Inspections – Code Enforcement – GIS – Planning & Zoning