

# CERTIFICATE OF OCCUPANCY REQUEST

Date: \_\_\_\_\_

Requested by: \_\_\_\_\_

Contact Number

Cell Number: \_\_\_\_\_

Home/Office Number: \_\_\_\_\_

Address of Subject Property: \_\_\_\_\_

\_\_\_\_\_

Plat/Lot: \_\_\_\_\_

Permit Number/Date: \_\_\_\_\_

Please Check One:

- Temporary Certificate of Occupancy
- Final Certificate of Occupancy

***\*\*\*Please note: Final cost breakdown must be submitted when Certificate of Occupancy is requested.\*\*\****

**PLEASE REQUEST TWO WEEKS IN ADVANCE.**

*Inspection and Standards  
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