



PERMIT # PERMIT FEE: \$75.00

CERTIFICATE OF OCCUPANCY APPLICATION

Certificate of Occupancy application must be applied for prior to occupancy of the building and all inspections must be completed within 60 days. If preparations for occupancy require 2 or more trades then a building permit will be required and the Certificate of Occupancy application is void, property can't be occupied prior to issuance of Certificate of Occupancy. THE CERTIFICATE OF OCCUPANCY SHALL BE PROMINENTLY POSTED AT THE POINT OF ENTRY.

PLEASE PRINT CLEARLY-COMplete ALL REQUESTED INFORMATION/NO REFUNDS

NEW BUSINESS NAME: _____ ADDRESS: _____

BUSINESS OWNER: _____ ADDRESS: _____ PHONE: _____

PROPERTY OWNER: _____ ADDRESS: _____ PHONE: _____

PREVIOUS USE: _____ PROPOSED USE: _____

EXISTING COMPANY: ____ YES ____ NO NEW START UP COMPANY: ____ YES ____ NO RELOCATING: ____ YES ____ NO

TOTAL OCCUPIED SQ FOOTAGE: _____ FIRE ALARM: ____ YES ____ NO SPRINKLERED: ____ YES ____ NO

NUMBER OF EXISTING PARKING SPACES: _____ NUMBER OF REQUIRED PARKING SPACES: _____

CHANGE OF TENANT: ____ CHANGE OF OWNERSHIP: ____ CHANGE OF NAME: ____ OCCUPANCY OF A BUILDING: ____

TEMPORARY OCCUPANCY: ____

**DOES YOUR OCCUPANCY INVOLVE ANY OF THE FOLLOWING?
PLEASE MARK THE APPROPRIATE USE:**

- | | |
|--|--|
| ____ ALCOHOLIC BEVERAGES | ____ COIN OPERATED GAMES, 8 LINER, ETC. HOW MANY? _____ |
| ____ ADULT OR CHILD CARE (5 OR MORE) | ____ COMPRESSED GASES (LPG ETC.) |
| ____ EXPLOSIVES/AMMUNITION/FIREWORKS | ____ SEMI-CONDUCTOR |
| ____ WELDING OR OPEN FLAME | ____ RECLAMING WASTE MATERIALS |
| ____ WOODWORKING/DUST PRODUCING EQUIPMENT | ____ SPRAY PAINTING |
| ____ FOOD AND/OR BEVERAGE PROCESSING, STORAGE OR SALES | ____ 12 FT. IN HEIGHT (INSIDE BUILDING) _____ |
| ____ GARAGE VEHICLE SERVICE/VEHICLE REPAIR | ____ NUMBER OF SQ FT STORAGE OVER 15 FT TALL (INSIDE BLDG) _____ |

EXISTING GREASE TRAP ____ YES ____ NO EXISTING SIZE OF GREASE TRAP _____ SIZE REQUIRED: _____

HAS ALL BUILDING REMODEL OR MODIFICATIONS BEEN COMPLETED? ____ YES ____ NO DO YOU NEED A UTILITY INSPECTION? ____ Y ____ N

HAZARDOUS MATERIALS: ARE THERE FLAMMABLE, COMBUSTIBLE OR OTHER HAZARDOUS MATERIALS TO BE STORED OR USED IN PROCESSING AT THIS FACILITY? YES _____ NO _____. IF YES, SUPPLY CHEMICAL LIST BY NAME AND QUANTITIES (MSDS).

THE GRANTING OF A CERTIFICATE OF OCCUPANCY DOES NOT CONSTITUTE A DETERMINATION THAT THE PROPOSED OCCUPANCY WILL OR WILL NOT VIOLATE ANY DEED RESTRICTIONS OR COVENANTS APPLICABLE TO THE PROPERTY UPON WHICH THE OCCUPANCY TAKES PLACE, NOR DOES IT AUTHORIZE ANY SUCH VIOLATION. I, _____ (PRINT NAME), AS OWNER OR AS AGENT FOR THE OWNER, HEREBY CERTIFY THAT I HAVE REVIEWED ALL THE COVENANTS AND RESTRICTIONS APPLICABLE TO THE ABOVE PROPERTY AND I FURTHER CERTIFY THAT I HAVE READ AND UNDERSTAND THE ABOVE PROVISIONS OF THIS NOTICE.

SIGNATURE OF OWNER/AUTHORIZED AGENT: _____ TX DL #: _____

PRINT NAME OF OWNER/AUTHORIZED AGENT: _____ Title: _____

PERSON TO CONTACT: _____ PHONE: _____ EMAIL: _____
(Please Print Name)

PLEASE CONTACT THE FIRE MARSHALL'S OFFICE AT 972-442-8110 TO SCHEDULE YOUR FIRE INSPECTION. AFTER YOU PASS YOUR FIRE INSPECTION YOU NEED TO CONTACT THE BUILDING INSPECTIONS DEPARTMENT AT 972-516-6420 TO SCHEDULE YOU'RE BUILDING INSPECTION.

APPROVALS WILL BE REQUIRED BY THE FOLLOWING DEPARTMENTS:

(Email acceptable in lieu of signature)	
FIRE MARSHAL:	DATE:
PLANNING:	DATE:
ENGINEERING:	DATE:
BUILDING INSPECTIONS:	DATE:
HEALTH:	DATE:

ZONING: _____ TYPE OF CONSTRUCTION: _____ OCCUPANCY GROUP: _____

BUILDING OFFICIAL: _____ DATE: _____