



Application for Certificate of Occupancy / Certificate of Completion

Date: _____ Date Required: _____
(48 hours Prior Notification required)

Permit Number: _____

Project Address: _____

Common Area Folio # _____

Contractor: _____

Contractor Name: _____

Contractor Address: _____

Work Phone Number: _____ Cell Phone: _____

Fax Number: _____ Email Address: _____

HAS THERE BEEN ANY MAJOR CHANGES TO THIS PROJECT?

YES____ NO____

If you answered yes, please explain:

Contact Name: _____

Phone Number: _____

Mail To: _____
