



Application for Commercial Certificate of Occupancy

101-E Mounts Bay Road, P. O. Box 8784 Williamsburg, VA 23187-8784
PHONE: (757) 253-6626 FAX: (757) 259-4038 Office Hours: Mon-Fri 8 a.m. - 5 p.m.

DATE _____ (A minimum of 7 business days notice is required.) A \$35 fee is due with this application.

- This Application is for a Temporary Certificate of Occupancy (C.O.)
- This Application is for a Permanent Certificate of Occupancy. One hundred percent (100%) of all work, building and site, is complete according to the approved plans, or will be by _____. (Date)

Please conduct the required Certificate of Occupancy inspections on _____. (Date)
(Building, mechanical, plumbing, and electrical final inspections shall be requested as usual)

The Anticipated date of occupancy is: _____. (Date)

PROJECT NAME: _____

PROJECT ADDRESS: _____

BUILDING PERMIT NO.: _____ SITE PLAN NO.: _____

RESPONSIBLE PARTY (Contractor or Owner): _____

CONTACT PERSON: _____ PHONE NO: _____

FAX NO.: _____ EMAIL ADDRESS (OPTIONAL): _____

SIGNATURE: _____ PRINT NAME: _____

OFFICE USE ONLY

Please complete and return to Doug Murrow or Joe Basilone. If not returned by _____, a C.O. will be issued without your input.

NAME: _____ DEPARTMENT: _____

COMMENTS/RECOMMENDATIONS:

Please contact responsible party to advise of all discrepancies. If no contact, please state reason:
