→DO NOT LOSE THIS FORM!←

CITY OF FOLSOM
CERTIFICATE OF OCCUPANCY APPLICATION

The applicant is responsible for coordinating all inspections and satisfying the requirements for each department's approval. Any inspection called for without that work being completed shall be assessed a reinspection fee. If an inspection is rejected, that department's inspector will leave a written correction notice. Utility companies may not be given a clearance nor a Certificate of Occupancy issued until all department approvals are received. **NOTE! The Building Inspector cannot sign off on a final inspection until all of the other appropriate departments have signed off.**

This form is to be kept at the job site and when approvals are received from each department's inspector, the applicant is responsible for submitting the completed form to the Chief Building Official at the Community Development's Building Division to apply for a Certificate of Occupancy.

If you have any questions, please call the Building Division at **(916) 351-3555**

THIS STRUCTURE IS NOT TO BE USED, OCCUPIED, OR FURNISHED IN WHOLE OR IN PART PRIOR TO THE ISSUANCE OF THE CERTIFICATE OF OCCUPANCY

In order to receive a **FULL Certificate of Occupancy**, the entire project must be completed with no conditions.

In order to receive a **TEMPORARY Certificate of Occupancy**, an *additional* ***$120 inspection fee*** must be paid, the building must be essentially done and the following items are required to be installed and operational: (Please note, since each building is different, *additional items may be required*. City phone numbers are on the back of this form.)

Exterior Finishes - Signage	Plan Check Fees/Approvals	Fire Alarms/Strobes/Horns (If Req'd.)
Roofing	Trees/Landscaping Requirements	Fire Extinguishers
Parking Lots	Water Service	Fire Sprinklers (If Req'd.)
Address Numbers	Plumbing Fixtures	Fire Rated Doors Installed (If Req'd.)
Electrical Outlets	Heating / Cooling System	Exit Paths, Signs, and Hardware
Electrical Panels Labeled	Handrails / Guardrails	Emergency Lights
Electrical Fixtures Installed or "Blanked Off"	Accessible Parking, Ramps, Signs, Restrooms, Etc.	Smoke / Heat Detectors

***→PLEASE NOTE*:** You will also need to submit a **letter** to the Chief Building Official requesting a Temporary Certificate of Occupancy. This letter must state *why* a Temporary C.O. is necessary, *what* will be occurring in the building, *what* is not complete, and on *what date* all incomplete items will be completed.

APPLICANT FILLS IN THIS PORTION: **TYPE OF REQUEST**: ___ TEMPORARY FINAL -Date of Request for Temporary: ___/___/____
___ FULL FINAL -Date of Request for Full: ___/___/____

For City Use:

PROJECT NAME:_____

PROJECT ADDRESS:_____VALUATION: $_____

Permit No:___-_____ Date Issued:_____ Const. Type:_____ Use Group:_____ Occ. Load: _____

Contact Person:_____ Phone:_____

Contact Person is: Owner _____Builder _____Designer _____Other _____Fax No:_____

Owner:_____ Builder:_____

Phone:_____ Fax:_____ Phone:_____ Fax:_____

Revised 11/05/13

IMPORTANT NOTE TO CITY INSPECTORS: **If you sign in the "Temporary" column, please write down the corrections that are necessary to make it a "Full" Certificate of Occupancy. Also indicate a compliance date. If you have no conditions, please sign in the "Full" column, even if a temporary was requested.**

		TEMPORARY C.O.	FULL C.O.
☑	**DEPARTMENT**	**SIGNATURE / DATE**	**SIGNATURE / DATE**
	Fire Dept. (916) 491-1257		
	Engineering Construction Inspector (916) 355-7251		
	Planning/Zoning (916) 355-7385 or 355-7385		
	Landscaping & Lighting (916) 355-7207		
	Arborist & Landscaping (916) 220-3016		
	Utilities Account – Finance		
	Business License - Finance		
	Bldg. Permit Technician (916) 351-3555		
	Sacramento Fire District (916) 942-3300		
	Utility Deposit / Encroachment Bond		
	Water Quality (916)439-8253		
	CD or DVD of scanned plans **(approved job set) 200 dpi B&W resolution**		

NOTE! **ALL SIGNATURES ABOVE ARE REQUIRED PRIOR TO SUBMITTAL TO THE BUILDING INSPECTOR**

	Building Inspector (916) 351-3555		

APPLICANT: **DROP THIS FORM OFF AT THE BUILDING SAFETY OFFICE FOR CHIEF BUILDING OFFICIAL'S SIGNATURE**

	Chief Building Official		

INSPECTOR'S CONDITIONS/COMMENTS (Attach Additional Sheets if Necessary)

Date	**Department**	**Inspector**
Comments		
		To be in compliance by:

Date	**Department**	**Inspector**
Comments		
		To be in compliance by:

Date	**Department**	**Inspector**
Comments		
		To be in compliance by: