

CITY OF ASHEVILLE BUILDING SAFETY DEPARTMENT

TEMPORARY CERTIFICATE OF OCCUPANCY

APPLICATION FEE \$200.00 (All fees are subject to an additional 4% technology fee.)

Permit Application # _____ Progress Energy Premise _____

Project Address _____

Name of Owner _____ Phone # _____ Fax # _____

Address of Owner: _____ City: _____ State _____ Zip _____

Name of Contractor: _____ Phone: _____ Fax: _____

Address of Contractor: _____ City: _____ State _____ Zip _____

For Public Occupancy Yes ____ **Open for Business Yes** ____ **For Stocking or Training of Employees Yes** ____

Number of Days Requested: ____30 ____ 60 ____ 90 **Original App** **1st Renewal** **2nd Renewal**

Requested Date of Inspection: _____

I, hereby request a temporary certificate of occupancy for the following reasons & utilities for the following portion of the building or service system which may be safely occupied prior to final completion of the building or system: _____

I further understand that a fee approved by the Asheville City Council, shall be charged for each new temporary certificate and for each renewal thereof. **(\$100.00 PRIOR TO EXPIRATION DATE; \$200.00 IF EXPIRED) (RE-INSPECTIONS FEES - \$75 PER INSPECTION FOR COMMERCIAL AND RESIDENTIAL) (All fees are subject to an additional 4% technology fee.)**

Signature of General Contractor is required. By signing this application, I agree to the following conditions:

If any temporary certificate of occupancy I receive allows partial occupancy of either persons or property, I will advise those persons, or any other tenants or other occupants that their continued occupancy and/or use is subject to compliance with the terms of such temporary certificate of compliance, and that, if those conditions are not complied with, the electrical, water and other utilities will be disconnected.

I understand that if the conditions of the temporary certificate of occupancy are not met by the expiration date of the original certificate, or of an extension of this temporary certificate of occupancy, All utilities will be disconnected after that expiration date.

Signature: _____ Phone Number: _____ Date _____

(General Contractor)

TRADE	INSPECTOR APPROVAL	PERMIT #	FINAL YES/NO	DATE
BUILDING				
ELECTRICAL				
MECHANICAL				
PLUMBING				
FIRE				
DRIVEWAY OR GRADING				
FLOOD OR STORMWATER				
SIDEWALK OR TRAFFIC				
ZONING/LEVEL 1 OR 11				
WATER RELEASE				
MSD - HOLD				