## **OFFICIAL** Temporary Certificate of Occupancy Request **FORM**

Business Name (if applicable):	Street Address
City, State and Postal Code	Phone Number

## Building Permit #: BLD20

Attn: Building & Safety Division City of Santa Barbara 630 Garden St. Santa Barbara, CA 93101

We request that Temporary Occupancy be granted at the above business location to be effect on (Effective Date) and expiring at 12:00 noon on \_\_\_\_\_ (Ending Date).

The reason we need Temporary Occupancy is \_\_\_\_\_

We acknowledge that the following list of items is yet to be completed or corrected: Pages may be attached

Building Items	Electrical Items
1.	1.
2.	2
3.	3.
Plumbing/Mechanical Items	Other Items
1.	1.
2.	2.
3.	3.

Before the Temporary Certificate of Occupancy expires, we will schedule inspections for items in the above list so as to resolve these to the satisfaction of inspectors in both the Building & Safety Division and Fire Department. If we fail to comply by the expiration date, we will cease all occupancy and vacate the premises until the building is in full compliance.

SIGNATURE - Business/Property Owner	Date	SIGNATURE - Construction Company Representative	Date
Print Name:		Print Name:	
Title:		Title:	
Business Name:		Business Name:	
Phone:		Phone:	
Email:		Email:	

Note: Approval of Temporary Occupancy does not infer or give any rights to permittee to omit required Title 24 code compliance or plan requirements. Corrections may follow at time of Final Inspection.

For expedited service, please fax the completed TCO form along with a completed Fee Payment Form (linked below) to Fax number (805) 564-5476

Fee Payment Form