



DEPARTMENT OF PLANNING AND
COMMUNITY DEVELOPMENT

CITY OF SUFFOLK

442 W. WASHINGTON ST., SUITE 1084A, SUFFOLK, VIRGINIA 23434
P.O. BOX 1858, 23439-1858, SUFFOLK, VIRGINIA

PHONE: (757) 514-4150 FAX (757) 514-4199

FEE \$110.00

TEMPORARY CERTIFICATE OF OCCUPANCY REQUEST

Please complete and return this form. The Building Division will return it to you with a reply.

DATE: _____ BUILDING PERMIT# _____

JOB SITE ADDRESS: _____

I would like to request a temporary certificate of occupancy for the following reason:

Time requested for Temporary Certificate of Occupancy: 30 days or 45 days

PERSON REQUESTING TEMPORARY CERTIFICATE OF OCCUPANCY:

PROPERTY OWNER (please print) SIGNATURE

CONTRACTOR (please print) SIGNATURE

APPLICANT (please print) SIGNATURE

MAILING ADDRESS: _____

PHONE NUMBER: _____

EMAIL ADDRESS: _____

PLEASE PRINT

THIS PORTION TO BE COMPLETED BY THE BUILDING OFFICIAL / DESIGNEE

APPROVED: _____ TCO EXPIRATION DATE: _____

COMMENTS: _____

DENIED: _____ REASON: _____

Building Official's / Designee's signature: _____ Date: _____