



For office use only:

Permit # \_\_\_\_\_  
Fee pd. \_\_\_\_\_  
Rec. # \_\_\_\_\_

Approvals:

Plan. Division: \_\_\_\_\_ Date: \_\_\_\_\_

PW Dept.: \_\_\_\_\_ Date: \_\_\_\_\_

**Temporary Certificate of Occupancy Application**

Date: \_\_\_\_\_

Reference Building Permit #: \_\_\_\_\_

**Project Information**

Property Location: \_\_\_\_\_ APN# \_\_\_\_\_

Property Owner: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Name Phone Email

Mailing address: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Address City State Zip

Contractor: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Name Phone Email

**Reason for Request**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Description of Remaining Work**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Requested Expiration Date of TCO**

We request that a TCO be approved with an expiration date of (MM/DD/YYYY): \_\_\_\_\_

**Acknowledgements**

We, the undersigned, request approval of a Temporary Certificate of Occupancy for the above referenced project. We are requesting such temporary occupancy due to project delays beyond our control. We understand that approval of a TCO is for a limited time, not to exceed 3 months, as determined by the Building Official. We also understand that it is our responsibility to provide evidence of all necessary inspections and approvals required to enable the Building Official to approve our application. We further understand that the TCO is subject to revocation upon expiration, or due cause, upon notification of such by the Building Official and agree to vacate the premises if so noticed.

We certify (or declare) under the penalty of perjury under the laws of the State of California that the foregoing is true and correct. We understand that all statements made in this application are subject to investigation and that any false or dishonest answer to any question may be grounds for denial or subsequent revocation of any permit issued to me.

\_\_\_\_\_  
Owner Name

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Contractor Name

\_\_\_\_\_  
Contractor Signature

\_\_\_\_\_  
Date

**Determination**

I have reviewed this application for a Temporary Certificate of Occupancy and have determined that the requested TCO is:

Approved

Denied

This TCO expires at 12:00 am on: \_\_\_\_\_  
Date

Signed: \_\_\_\_\_  
Building Official, City of Carmel-by-the-Sea Date

Special Stipulations:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**When signed by the Building Official, this application will serve as the Temporary Certificate of Occupancy for the above referenced property pursuant to the stipulations contained herein. This TCO shall be kept on site and available for inspection upon request by the City of Carmel-by-the-Sea Community Planning and Building Department.**