



City of Palo Alto

Public Works Engineering

Phone: 650/329-2151 FAX: 650/329-2240

www.cityofpaloalto.org

APPLICATION FOR CERTIFICATE OF COMPLIANCE

APPLICATION: _____ COC- _____

APPLICANT

Name: _____

Address: _____

E-Mail: _____

Phone: _____

PROPERTY

Address: _____

Assessor's Parcel No. (APN): _____

Owner(s): _____

(a) Existing Use: _____

(b) Proposed Use: _____

(c) Proposed Improvements: _____

Expected date of completion: _____

(d) Existing easements, leases, rights-of-way, licenses, or other encumbrances (attach copies): _____

(e) Purpose of the Certificate of Compliance: _____

Property Owner Signature

Date

Property Co-Owner Signature

Date

APPROVALS:

INITIALS:

DATE:

COMMENTS:

Planning: _____

Public Works Survey: _____

City Attorney: _____

Light & Power Eng: _____

WGW Engineering: _____

Building Inspection: _____