



CERTIFICATE OF OCCUPANCY APPLICATION

\$100 PERMIT FEE*

WILL THERE BE ANY ALTERATIONS/REMODELING TO THE BUILDING? ☐ YES ☐ NO
If yes, please contact Building Inspections to determine if additional permits may be required.

APPLICANT INFORMATION

Name:

Phone Number:

Email:

BUSINESS INFORMATION

Name:

Address:

Bldg/Suite Number:

Previous/Current Use:

Proposed Use:

Provide a description of all operations, including services provided and/or goods to be sold or stored:

Square Footage:

Number of Stories:

PLEASE NOTE: A property is not permitted for occupancy or business operations until all inspections have been completed and the Certificate of Occupancy has been issued.

Will you be needing a Gas Meter Release?	☐ Yes	☐ No
If yes, please list the Plumbing Contractor:		
Will you be needing an Electric Meter Release?	☐ Yes	☐ No
If yes, please check the Electric Supplier:	☐ AEP	☐ Taylor Electric
Is the business equipped with an automatic fire sprinkler system?	☐ Yes	☐ No
Will materials be stored above 12 feet in height?	☐ Yes	☐ No
Will food, beverages, or ice be packaged, sold, or consumed?	☐ Yes	☐ No
Will alcoholic beverages be sold for consumption?	☐ Yes	☐ No
Will you be displaying or offering the sale of paraphernalia items commonly used, or commonly known to be used, for the consumption of illegal substances?	☐ Yes	☐ No
Will this business be equipped with working fueling stations?	☐ Yes #_____	☐ No

*A Health Review is an additional \$100.

Building Inspections

555 Walnut Street

Abilene, Texas 79601

325.676.6232

BUILDINGPERMITS@ABILENETX.GOV

INSPECTION INFORMATION

1. Post address in a manner clearly visible from above-named street. Numerals shall be a minimum of four (4) inches tall and ½-inch stroke, installed on a contrasting background.
2. Provide "NO SMOKING" signage.
3. Portable fire extinguishers shall be provided as indicated below:
 - a. Mount ABC type dry chemical fire extinguishers in accessible locations as needed to maintain a maximum travel distance of 75 feet from all areas of the building to an extinguisher.
 - b. Extinguishers shall have a minimum rating of 2-A, 10-B:C and/or a minimum capacity of five (5) pounds.

Inspections can be scheduled in the following ways:

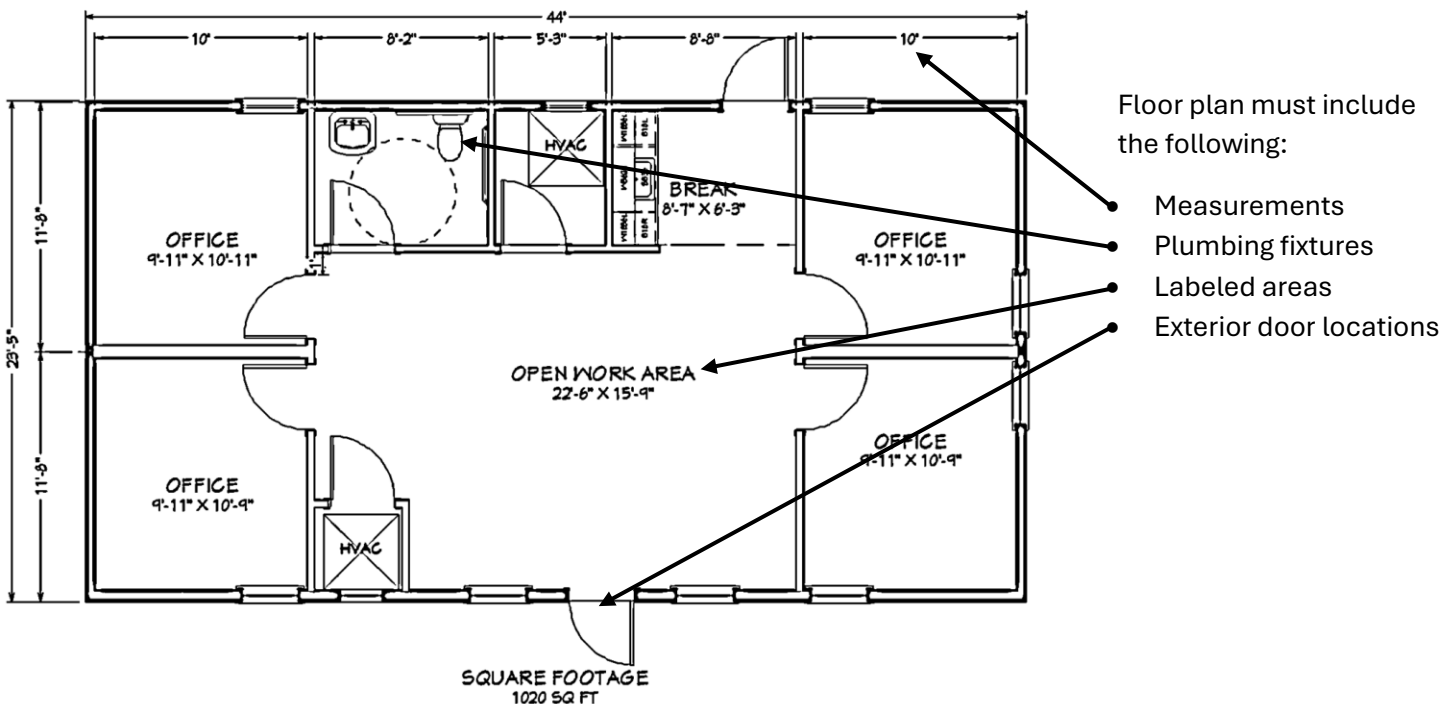
- Call the Building Inspections department at: 325-676-6232,
- Email the Building Inspections department at: buildingpermits@abilenetx.gov,
- Online through the MyGOV permitting portal.

*Inspections are scheduled for the following business day, or any day thereafter.

**Provide a contact name and phone number when scheduling inspections.

****DETAILED FLOOR PLAN REQUIRED TO BE SUBMITTED WITH THIS APPLICATION****

Example floor plan shown below.



No change is to be made to the building, the premises, or uses which are inconsistent with the information provided within this application. I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Signature: _____ Date: _____

Printed Name: _____