# APPLICATION FOR CERTIFICATE OF USE AND OCCUPANCY

Submit one application for each building or structure. Please print or type. All sections must be completed. CPA number can be Obtained from your approval plans. This form is also available at www.cityofsteubenville.us

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| 1 | Type of Certificate of Occupancy requested: (check one) | ☐ 180 days Temporary ☐ Partial Occupancy<br>☐ Time-Limited Occupancy** ( Request for _____ days) ☐ Temporary Structures<br>☐ Existing Building Occupancy** (including day care center) | |
| 2 | BPN Number: | County: | Is this building located in the City of Steubenville?<br>☐ Yes ☐ No |
| 3 | Name of Project:<br>Address: City Zip<br>Direction: | | |
| 4 | Name of Submitter:<br>Address: City State Zip<br>Phone ( ) Fax ( ) Email: | | |
| 5 | Name of Property Owner:<br>Address: City State Zip<br>Phone ( ) Fax ( ) Email: | | |
| 6 | For Partial Occupancy request only, list specific areas, floors or room numbers for which Occupancy is being requested.<br>Square Footage: | | |
| 7 | Building use occupancy group(s): | 12 | Building construction type: |
| 8 | Has this project received final plan approval?<br>☐ Yes<br>☐ No, application is subject to plans examiners approval. | 13 | I hereby certify that I am the: (select one)<br>☐ Owner ☐ Agent for the Owner<br>And all information contained in this application is true, accurate and complete to the best of my knowledge. All official correspondence in connection with this application should be sent to my attention at the address shown above.<br>_____ _____<br>Signature Date<br>_____<br>Print or type name of signer |
| 9 | Have the following areas of work received final inspections or testing?<br>Fire Suppression ☐ Yes ☐ No ☐ N/A<br>Fire Alarm ☐ Yes ☐ No ☐ N/A<br>Electrical ☐ Yes ☐ No ☐ N/A<br>Plumbing ☐ Yes ☐ No ☐ N/A | | |
| 10 | FEE TO BE PAID:<br>Electrical safety Inspection (1327.04(b) OBC)…$90<br>Certificate of Occupancy (115.9 OBC)…….$25<br>Total Fee Due..… $115 | 14 | **THE AREA BELOW IS FOR OFFICIAL USE ONLY**<br>Processed By:<br>Date Received: |
| 11 | Fees paid by: ☐ Cash ☐ Check<br>Make Check Payable To: **City of Steubenville** | | Check No.:<br>Verification No.: |

**For existing building occupancy and time-limited occupancy, a most recent **building fire safety inspection report** showing that there are **no violations of law or orders** pending in the building must be submitted with this application (111.1.5. and 111.2 OBC).