



Office Only	
C/O #	_____
Receipt #	_____
Date:	_____

Certificate of Occupancy Permit

Property Address:		Date:	
Zoning:			
Property Owner:		Building Sq. ft. Area:	
Type of Permit: <input type="checkbox"/> Change of Ownership <input type="checkbox"/> Change of Occupant <input type="checkbox"/> Change of Name <input type="checkbox"/> New Construction <input type="checkbox"/> Other _____ <input type="checkbox"/> In-home daycare: Are you the Primary Resident of the Project Address: Yes / No			
Contractor	Address	City, State Zip	Phone
Electric:			
Plumbing:			
Building:			
Business Name:		Business Owner:	
Type of Business:		Phone:	
Activities Being Conducted:			
<u>Gas Available</u> Yes / No	<u>Electric Available</u> Yes / No	<u>Fire Sprinkled</u> Yes / No	<u>Fire Alarm</u> Yes / No
			<u>RPZ Installation</u> Yes/No
			<u>Food Served/Prepared</u> Yes / No
A separate permit is required for each tenant space and/or building			
AN ISSUED PERMIT BECOMES INVALID IF THE WORK ON THE SITE AUTHORIZED BY THE PERMIT DOES NOT COMMENCE WITHIN 180 DAYS OF ISSUANCE, OR IF THE WORK ON THE SITE IS INCOMPLETE DUE TO SUSPENSION OR ABANDONMENT 180 DAYS AFTER THE WORK COMMENCED. ALL PERMITS REQUIRE A FINAL INSPECTION.			
I HEREBY CERTIFY THAT I AM AN AUTHORIZED AGENT OF THE OWNER, AND HAVE THE OWNER'S CONSENT TO ENTER ONTO THE PROPERTY TO COMPLETE THE WORK. AFTER CLOSE REVIEW OF THIS APPLICATION, I FURTHER CERTIFY THAT THE INFORMATION PROVIDED IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. THE WORK SHALL COMPLY WITH ALL PROVISIONS OF LAWS AND ORDINANCES, WHETHER SPECIFIED OR NOT. THE GRANT OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY FEDERAL, STATE, OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.			
Printed Name of Applicant: _____		Date: _____	
Signature of Applicant: _____			
Please have the following departments sign in order stated			
Inspection Dept	Signature	Approved / Denied	Date
1 Zoning In Office		Yes / No	
2 Fire Marshal 903-935-4580		Yes / No	
3 Health Dept. 903-935-4427		Yes / No	
4 Building 903-935-4455		Yes / No	

This handout is for informational purposes only and should not be relied on in place of official regulations and/or policies. The City of Marshall makes no representations, guarantees, or warranties as to the accuracy, completeness, currency, or suitability of the information provided via the handout. Customers and citizens are personally responsible for complying with all local, state and federal laws pertaining to projects within the City. Copies of the City of Marshall adopted codes and Zoning Ordinances can be found on the city website at www.marshalltexas.net or at the City of Marshall Planning & Development Department located at 401 S. Alamo St., Marshall, TX 75672.

Certificate of Occupancy Checklist

The following items listed below are to provide a guide to maintain a reasonable degree of fire and life safety. If you have any questions regarding these items, please contact the Planning & Development Department.

1. ____ Address/Unit number posted on the front and rear of the building.
2. ____ Has your building had a Customer Service Inspection (CSI) to insure there are no water cross connections that exist that could expose the city water supply to contamination and there is proper backflow protection on the building? This is a Texas Commission on Environmental Quality (TCEQ) requirement for all City water connections. If you are unsure, contact the Planning & Development Department (903)935-4455. **PLEASE NOTE: All buildings are required to have a CSI inspection on file.**
3. ____ Have all abandoned drain/sewer lines been properly plugged or capped?
4. ____ Are all fire extinguishers properly inspected, mounted and spaced for your building? If you are unsure about the number of extinguishers needed or their spacing, please contact the Fire Marshal's office for assistance at (903)935-4580.
5. ____ Is the building's electrical wiring in good repair? Examples: Is there any exposed wiring, and are all electrical panels labeled, and with covers in place? Are there any open holes in the electrical panel or missing breaker switches?
6. ____ Are all exit doors unobstructed, accessible and operating easily? **NOTE: Only one latching device is allowed on an exit door.**
7. ____ Are all exit and emergency lights working properly?
8. ____ Is all combustible storage kept a safe distance away from heat producing appliances and equipment or a minimum of 18 inches below the ceiling height?
9. ____ If this is a commercial food service or restaurant, have all cooking appliances, vent hoods and suppression systems been serviced, inspected and tagged? Do you have the proper Health Department Food Certificate to operate the business? Please contact the Planning & Development Department for more information at (903) 935-4455.
10. ____ Is the electrical panel for this building located in this tenant area or is it located in another tenant area of the building? If outside this tenant area, does the occupant or tenant have access to the electrical panel at all times? Please note this may not be applicable to your Certificate of Occupancy. Please contact the Fire Marshal's office at (903)935-4580 or the Planning & Development Department at (903) 935-4455 if you have any questions.

Please note: Your building will be subject to periodic fire and safety inspections by the Fire Marshal's office in accordance with the locally adopted Fire Code and City of Marshall Code of Ordinances and annual Consumer Health inspections for food establishments.