City of
SACRAMENTO
Community Development

300 Richards Blvd., 3rd Floor
Sacramento, CA 95811

Help Line: 916-264-5011
www.cityofsacramento.gov/cdd

Certificate of Occupancy Request

Project Address: _____   Main Permit #: _____

Project Name: _____

Permit Applicant: _____

Relationship to Project: _____

Email: _____   Phone: _____

List ALL Associated Permit Activities: (phased permits, partial permits, revisions, deferred submittals)

	Record #:	Status:
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____

Signature: _____   Date: _____

Allow up to five (5) working days to complete the Certificate of Occupancy.

STAFF ONLY

Intake Date: _____   Staff Intake Initials: _____

All permit status's finaled or complete?   ☐ Yes   ☐ No

All Accela conditions resolved?   ☐ Yes   ☐ No

All fees paid?   ☐ Yes   ☐ No

Processor's Initials: _____   Date: _____

Approver's Initials: _____   Date: _____