

City of Pomona —Building and Safety Division **Application for Certificate of Occupancy**

Please complete the following application:			☐ CERTIFICATE OF OCCUPANCY☐ TEMPORARY CERTIFICATE OF OCCUPANCY	
Re	ason for Temporary Certificate of Occupar			
ADI	DRESS:		PERMIT NUMBER:	
	<i>ipant information:</i> INESS NAME:			
APP	LICANT NAME:			
ADI	DRESS:			
РНС	NE NUMBER:	EMAIL ADDRESS		
PER	FERRED CONTACT: PHON	E DEMAIL	SPRINKLERS: YES □	NO□
		ITEMS ARE REQUIRED ***	**	
COMMERCIAL BUILDING: OCCUPANCY LOAD: TYPE OF CONSTRUCTION: OCCUPANCY GROUP: DESCRIPTION: OCCUPANCY GROUP: OC				
		nd the statements contained in this apposing signature I confirm I make this statem	lication and that they are true and corrent under penalty of perjury.	ect.
	Signature			Date
SPEC	CIAL REQUIREMENTS:	AMO	UNT OF TIME GIVEN DEPA	RTMENT REQUESTED
1	DEPARTMENT PLANNING	PRINT NAME	SIGNATURE	DATE
2	FIRE DEPARTMENT			
3	TRANSPORTATION			
4	ENVIRONMENTAL/PW			
5	WATER ENGINEERING 'Prior to sign off: Fire must be signed off and Backflow			
6	UTILITY SERVICES *Hydrant Meter			
*	Once signatures have been obtained	d by all departments above, plea	se return to Building Departme	nt for the final review.
7	INFRASTRUCTURE	· •		
8	BUILDING			
	ADDITION NOT SHALL CONT	TACT FACH DEPARTMENT	DIVISION FOR THEIR REQU	UIRMENTS:

PLANNING DIVISION FIRE DEPARTMENT BACKFLOW INSPECTOR 909-802-7406

909-620-2191 323-890-4125 Main Line Main Line Jose Chavez WATER RESOURCES DEPARTMENT PUBLIC WORKS - ENVIRONMENTAL UTILITY SERVICES **BUILDING DEPARTMENT**

909-620-2251 909-620-2285 909-620-2232

909-620-2367

Main Line Carmen Barsu Rozaluia Outley Agustine Figueroa