

**TEMPORARY CERTIFICATE OF OCCUPANCY APPLICATION
COMMERCIAL / INDUSTRIAL**

DATE: _____

PERMIT # _____

ADDRESS: _____

LOT # _____

CONTRACTOR: _____

FAX # _____

NEW PROPERTY OWNER: _____
(Name and mailing address)

CLOSING DATE: _____

APPLICANT'S SIGNATURE _____

In accordance with Village code and policy, I have requested and received approval for each of the following inspections:

<u>INSPECTION</u>	<u>APPLICANTS INITIALS</u>	
FINAL BUILDING	_____	
FINAL PLUMBING	_____	
FINAL METER	_____	
LANDSCAPING	_____	
ENGINEERING	_____	
FIRE DEPT	_____	
WILL CO HEALTH DEPT	_____	(IF APPLICABLE)
ELEVATOR APPROVAL	_____	(IF APPLICABLE)

FOR OFFICE USE

<u>INSPECTION</u>	<u>DATE APPROVED</u>
FINAL BUILDING	_____
FINAL PLUMBING	_____
FINAL WATER METER	_____
LANDSCAPING	_____
ENGINEERING	_____
FIRE DEPT	_____
WILL CO HEALTH DEPT	_____
ELEVATOR	_____

OCCUPANCY REQUEST APPROVAL DATE: _____

The Village of New Lenox has reviewed and approved all required inspections and documentation necessary to obtain the Certificate of Occupancy.

OCCUPANCY REQUEST DENIAL DATE: _____

The Village of New Lenox has reviewed the required inspections and documentation necessary to obtain the Certificate of Occupancy and must deny the request due to the following deficiencies:

Comments: _____

NOTE: ALL APPLICATIONS WILL BE REVIEWED WITHIN ONE BUSINESS DAY, MONDAY – FRIDAY, OF THE SUBMITTAL DATE.