



**PLANNING AND CODES**

TOWN OF DENTON

13 North Third Street, Denton, Md. 21629  
 (410) 479-3625  
 (410) 479-3534 fax  
 www.dentonmaryland.com

# REQUEST FOR TEMPORARY CERTIFICATE OF OCCUPANCY APPLICATION

OFFICIAL USE ONLY	
Application Date:	_____
Building Permit (BP) # 20	_____ - _____
Zoned:	_____ Critical Area: _____
Exception Required: Variance / Special	<input type="checkbox"/> Yes <input type="checkbox"/> No
Other Approvals Required	<input type="checkbox"/> DHARC <input type="checkbox"/> P&Z <input type="checkbox"/> Site Plan Review
Copies to:	<input type="checkbox"/> Chief, Police Dept. <input type="checkbox"/> Chief, Fire Dept. <input type="checkbox"/> Director, DPW

THIS PERMIT IS A TWO-PAGE APPLICATION. COMPLETE ALL APPLICABLE SECTIONS. INCOMPLETE APPLICATIONS CANNOT BE PROCESSED.

PROPERTY AND CONTACT INFORMATION	LOCATION OF / PROPERTY ADDRESS ( Number and Street , Suite and Apartment Number )				TAX MAP / GRID / PARCEL	
	NAME		MAILING ADDRESS ( Number or P.O. Box, Street, City, State, Zip Code		TELEPHONE AND FAX NUMBER EMAIL ADDRESS	
	APPLICANT	COMPANY				NUMBERS
		LAST	FIRST			EMAIL
	ARCHITECT	COMPANY				NUMBERS
		LAST	FIRST	Md. State Reg. #		EMAIL
	CONTRACTOR	COMPANY				NUMBERS
		LAST	FIRST	Md. MHIC #	Expiration Date	EMAIL
	STRUCTURAL ENGINEER	COMPANY				NUMBERS
		LAST	FIRST	Md. State Reg. #		EMAIL
PROPERTY OWNER	COMPANY				NUMBERS	
	LAST	FIRST			EMAIL	

## OCCUPANCY INFORMATION

Specify below the area (s) that this request is for. Attach a copy of floor plan with highlighted areas, or list room name or numbers as they are identified on the approved construction plans. Also specify what each area will be used for during the temporary occupancy (ie. Stocking, training, interviews, storage, sales, etc.). Attach a separate sheet if necessary.

Description	Use
Description	Use
Description	Use
Description	Use
Description	Use
Description	Use

## CONDITIONS PERTAINING TO TEMPORARY OCCUPANCY PERMITS

\_\_\_\_\_ A Temporary Certificate of Occupancy expires after 90-calendar days. This form is for Non-Residential Permits Only.

\_\_\_\_\_ Please complete this request form and return to the Town of Denton Planning and Codes. Your request will be processed generally in two (2) business days and you will be notified to schedule an inspection before receiving an approval for any occupancy.

\_\_\_\_\_ When all required inspections have been approved and all requested information received, the Temporary Certificate of Occupancy will be prepared within two (2) business days. The **Temporary Certificate of Occupancy must be posted on the premises in a conspicuous location.**

## PROPERTY OWNER OR AUTHORIZED AGENT ACKNOWLEDGEMENT

*The information contained in this request is accurate to the best of my knowledge. I understand, as the property owner or authorized agent of the property owner, that it is my responsibility for compliance with all applicable Federal, State, and Local laws, and any agent authorized to represent me does not relieve the property owner of the aforementioned responsibility.*

\_\_\_\_\_  
Property Owner / Authorized Agent Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

## SPECIAL CONDITIONS

*This occupancy may be suspended or revoked wherever the certificate is issued in error, or on the basis of incorrect information supplied, or where it is determined that the building or structure or portion thereof is in violation of any ordinance or regulation or any of the provisions of the applicable building codes. The suspension or revocation shall be made in writing from the Town of Denton, authorized building official.*

### OFFICIAL USE ONLY

Approved     Denied

Approved with Conditions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**This structure has been inspected and to the best of my knowledge complies with the applicable codes, regulations, and laws of the Town of Denton that were in effect at the time of the request. All final inspections have been completed and this area is approved under the conditions of this request.**

\_\_\_\_\_  
Building Official

\_\_\_\_\_  
Date