



**PLANNING & DEVELOPMENT SERVICES**

# APPLICATION FOR CERTIFICATE OF USE AND OCCUPANCY

**PURSUANT TO PAMC SECTION 16.04.190**

Date:	Permit Number:
<b>TENANT INFORMATION</b>	
Tenant Name:	Bldg. or/and Suite #:
Tenant Space Address:	
Name of Business Operator:	
Operator Mailing Address:	
Operator Email:	Operator Phone Number:
<b>OWNER INFORMATION</b>	
Name:	Mailing Address:
<b>DESCRIPTION OF PROPOSED BUSINESS</b>	
<b>BUILDING &amp; INTENDED USE INFORMATION</b>	
Square Footage of Building:	Total number of floors in this building:
Square Footage of Tenant Space:	Which floor(s) are occupied by the tenant:
Building Code Occupancy Type(s):	
Are any tenant improvements currently proposed? <i>If yes, see General Guidance Notes 1 and 2.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the storage or use of hazardous materials proposed? <i>If yes, provide HAZARDOUS MATERIALS CHECKLIST.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is this a food service establishment? <i>If yes, provide SCHD to Approval to Operate Certificate.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>REQUIRED DOCUMENTS TO BE SUBMITTED</b>	
<input type="checkbox"/> Site plan indicating the location(s) of tenant space. <input type="checkbox"/> Additional site plan may be required that indicates on-site parking. If the proposed business is considered a use intensification, additional parking could be required. (if applicable) <input type="checkbox"/> Dimensioned floor plan(s) of tenant space requesting occupancy. <input type="checkbox"/> Fire Department required: HAZARDOUS MATERIALS CHECKLIST. (if applicable) <input type="checkbox"/> Santa Clara Health Department required: Approval to Operate Certificate. (if applicable) <input type="checkbox"/> Confirmation that a tenant improvement building permit application has been submitted. (if applicable)	

**GENERAL PERMITTING GUIDANCE & FEE INFORMATION**

1. All changes to the exterior of the building, including signs or any parking modifications resulting from an intensification of use, will require some level of Planning review. For information regarding the Planning application process, please contact Planning at (650) 617-3117 or at [planner@cityofpaloalto.org](mailto:planner@cityofpaloalto.org).
2. A Building Permit is required for alterations to the building, plumbing, mechanical, or electrical systems. For information on necessary permits, please contact Building at (650) 329-2496 Option 1 or at [buildingpermits@cityofpaloalto.org](mailto:buildingpermits@cityofpaloalto.org).
3. A one-time fee is required for the processing of this application. Fees must be paid online through our [Accela Citizen Access Portal](#) (ACA). Once on the ACA website, you can search for the record utilizing the ten-digit Permit Number.
4. Once this Certificate of Use and Occupancy permit has been issued, and after receiving approved Building and Fire Department inspections, an official certificate of occupancy will be mailed to the business operator, and it shall be posted at the premises.

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Print Applicant Name

\_\_\_\_\_

Applicant Signature

**CITY REVIEW AND INSPECTION SECTION**

**PLANNING**

Zone District:	<input type="checkbox"/> Permitted – or - <input type="checkbox"/> Conditional Use	CUP # (if applicable):
	<u>Previous</u>	<u>Proposed</u>
Use Classification (Zoning):		

**BUILDING PLAN REVIEW**

Occupancy Class (Bldg.):		
Maximum Occupancy Load:		

Explanation of Occupancy Load Determination (per occupancy type):


REQUIRED DEPARTMENTAL APPROVALS	STAFF SIGNATURE	DATE
PLANNING:		
BUILDING PLAN REVIEW:		
FIRE DEPARTMENT: (650) 329-2184 <b>990 FIRE INSPECTION/FINAL INSPECTION</b>		
BUILDING INSPECTION: (650) 329-2496 <b>103 USE AND OCCUPANCY INSPECTION</b>		

Both Fire and Building inspections can be scheduled utilizing our iRequest Mobile App available at Apple App Store or Google Play.

