

County of Summit; Building Standards Division

1030 East Tallmadge Avenue
Akron, Ohio 44310
330.630.7280 330.630.7296 FAX
www.co.summit.oh.us/executive/bldg.stds.htm

Request for Commercial Partial Occupancy Permit
Fee: \$226.60

All life-safety elements shall be operational prior to issuance of any partial occupancy request.

- | | | |
|---------------------------|----------------------|--------------------------------|
| 1. Accessibility Features | 2. Egress Components | 3. Emergency / Exit Lighting |
| 4. Fire Alarm | 5. Fire Suppression | 6. Portable Fire Extinguishers |

NOTES: Permit may be revoked at anytime for noncompliance with terms of issuance.
Requests for partial occupancy shall be received ten (10) days prior to issuance.

Required Information:

Property Address: _____ Date: _____

Project Name: _____ Building Permit #: _____

City: _____ Zip Code: _____

Applicant: _____
(Owner, Agent, Tenant) (Company Name)

Address: _____ City: _____ Zip: _____

Telephone: _____ Cell #: _____

Name: _____ Signature: _____
(Owner, Agent, Tenant) (Owner, Agent, Tenant)

Specific Need for Partial Occupancy: _____

Specific Dates for Partial Occupancy: _____ to _____

Office Use Only:

Building / Mechanical Inspector: Approved Not Approved
Fire Protection Inspector: Approved Not Approved
Local Fire Official: Approved Not Approved
Electrical Inspector: Approved Not Approved
Plumbing Inspector: Approved Not Approved

Issue Date: _____ **Certificate Number:** _____

Occupancy Limitations: _____