

CITY OF DANA POINT

COMMUNITY DEVELOPMENT, BUILDING AND SAFETY

33282 Golden Lantern, Suite 209 Dana Point, CA 92629 949 248-3564 www.danapoint.org



A004-C OF O

2022 CALIFORNIA CODES

CODE CYCLE

PERMIT NUMBER

SUBMITTAL DATE

CERTIFICATE OF OCCUPANCY APPLICATION

PR	ROJECT INFORMATION		
	See website to locat	e code: www	v.osha.gov/pls/imis/sicsearch.html
No. of Stories:	Square footage	2:	Type of Construction:
Fire Sprinklers Installed: ☐ Yes ☐ No			
NEW BUSII	NESS OWNER'S INFORM	TATION	
Owner's Name:		Phone #	
		State:	Zip:
PROPER'	TY OWNER'S INFORMA	TION	
Name:		Phone #	
		State:	Zip:
OF OCCUPANCY			
uilding or Structure	☐ Tra	nsfer of Liquo	or License
_	☐ Oth	ner	 -
oup in Existing Bldg.			
	No. of Stories: Fire Sprinklers Insta NEW BUSII PROPER OF OCCUPANCY ilding or Structure a C of O	No. of Stories: Square footage Fire Sprinklers Installed: Yes No NEW BUSINESS OWNER'S INFORM PROPERTY OWNER'S INFORMAT OF OCCUPANCY ilding or Structure a C of O	See website to locate code: www No. of Stories: Square footage: Fire Sprinklers Installed: Yes No NEW BUSINESS OWNER'S INFORMATION Phone # State: PROPERTY OWNER'S INFORMATION Phone # State: OF OCCUPANCY ilding or Structure a C of O

➤ Change of Ownership and/or Change of Name will not need a Certificate of Occupancy.

For any new business, change in use or occupancy in existing buildings, legal non-conforming business, or other change to a business, plans shall be submitted for review. See B106-C of O handout for submittal requirements. The plans will be reviewed by all applicable agencies. A Certificate of Occupancy will be issued after all inspections are approved by the various agencies such as Building, Fire Dept, and Zoning.

The review requirements of the planning division are inclusive of the zoning and use. Accessibility and path of travel are Building Division elements. Approval of the use and zoning does not necessarily grant approval by the Building and Safety Division. For additional information and requirements, see the Obtaining Certificate of Occupancy handout

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B106-C OF O and the back side of this form. Reviews, City Approvals and any outside agency approvals are required prior to permit issuance. An inspection will be performed for all C of O's.

For Businesses where a Discretionary Approval, or any type of Tenant Improvements to the structure are proposed, including moving or constructing new partitions, changes to the electrical, mechanical, or plumbing systems, and certain Food service and/or Automotive uses shall use the Building Permit Application and follow the procedures for a <u>Tenant Improvement</u>.

Accessibility upgrades or improvements. Modifications to the parking lot, including Modifications to the landscape and/or site Automotive shops. Additional Electrical, M Food Service occupancies will require both Interceptor code compliance is required. F Water Quality Engineer, City of Da South Coast Water District, (949) Moulton Niguel Water District, (949) Capistrano Valley Water District, (949)	drainage. echanical and Water Quality requirements apply. Public Works and Water District approvals. Water Quality and Grease or additional information contact: ana Point (949) 248-3584 499-4555, or 49) 831-2500 or
stations. (714) 433-6000	
Any signage changes shall be permitted se	parately and approved as part of the planning review.
Massage Establishments. Additional licensi	
Any "Restricted Use" as determined by the	- ,
For Industrial Facilities subject to the State (NEC) is required.	Industrial Permit, proof of coverage or No Exposure Certification
(1.12)	VERIFICATION
<u>Initials</u>	
	application and state that the information I have provided is correct and agree to comply and the provisions and conditions of any permit issued pursuant to this application.
I certify that no Tenant Improvements have will not be covered without inspection and	re been or are planned for this location and I will ensure that items requiring inspection d approval by the Building Inspector.
D: 41	
Print Name:	☐ Owner ☐ Agent ☐ Other
Signature:	☐ Owner ☐ Agent ☐ Other Date Signed:
Signature:	
Signature:	Date Signed:
Signature:	Date Signed: * * * * City of Dana Point Use Only * * * * * * * * * * * * * * * * * * *
Signature:	Date Signed: * * * * City of Dana Point Use Only * * * * * * * * * * * * * * * * * * *
Signature: **** Building:	Date Signed: * * * * City of Dana Point Use Only * * * * * * * * APPROVALS Date:
Signature: **** Building: Planning: (Director of Community Development)	Date Signed: **** City of Dana Point Use Only ****** APPROVALS Date: Date:
Signature: ***** Building: Planning: (Director of Community Development) Public Works: (Verify SIC Code)	Date Signed: **** City of Dana Point Use Only ******* APPROVALS Date: Date: Date:
Signature: ***** Building: Planning: (Director of Community Development) Public Works: (Verify SIC Code) Code Enforcement:	Date Signed: * * * * City of Dana Point Use Only * * * * * * * * APPROVALS Date: Date: Date: Date:
Signature: ***** Building: Planning: (Director of Community Development) Public Works: (Verify SIC Code) Code Enforcement: Water District Will Serve Letter: OC Health OK to open:	Date Signed: * * * * City of Dana Point Use Only * * * * * * * * * APPROVALS Date: Date: Date: Date: Date: Date:

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Conditions or Restrictions: