



# Certificate of Occupancy Permit Application

**Development Services  
Department**  
90 E. Civic Center Dr.  
Gilbert, AZ 85296  
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[www.gilbertaz.gov](http://www.gilbertaz.gov)

*A Community of Excellence*

Permit Number: **BLD-**\_\_\_\_\_

**Do not complete this application if** any interior/exterior construction work is being done or has been done, such as: adding/removing/modifying walls, making additions and/or renovations to the electrical, plumbing, or mechanical systems, etc. A [Tenant Improvement Application](#) is required for this type of work. [Permanent and temporary signage](#) (banners) require a separate permit.

This Application will be processed in one of two ways:

- **Reviewed while you wait** – This is strictly for an office environment, such as: insurance, real estate or attorney offices. The application will be reviewed by counter staff. A permit will be issued upon approval. Permit cost is \$110.
- **Reviewed within two (2) working days** – This application will be reviewed by Building, Fire and Planning/Zoning. A permit will be issued upon approval. Permit cost is \$250.

**\*CAUTION: A PERMIT IS NOT A CERTIFICATE OF OCCUPANCY\***

**You are responsible for scheduling required inspections. Contact phone number will be supplied to you at time of permit issuance. Upon inspection approval, a Certificate of Occupancy will be generated for mailing or pickup.**

Business Name \_\_\_\_\_

Business Address \_\_\_\_\_ Suite No. \_\_\_\_\_

Owner \_\_\_\_\_  
Name Address

Type of Business \_\_\_\_\_

Plaza/Business Park Name \_\_\_\_\_

Is the electrical power on or has it been on in your space? Circle – Yes or No

This information is needed to determine which inspections are required and the order in which they need to occur.

Contact Person \_\_\_\_\_  
Name Phone Number

**In addition to this application**, complete and submit a [Business License Application](#) and provide the following:

- A Floor plan – (may be hand drawn) that identifies all room/area uses including: office space, storage areas, rest rooms, work areas, shelving areas/layouts and exits. Also identify the types of businesses adjacent to your suite on your floor plan to determine any separation requirements needed.
- You will be notified during the review process if a [Gilbert Fire Prevention Business Operation and Storage Disclosure Form](#) is required.

### **PAYMENT IS BY CASH OR CHECK ONLY AT TIME OF PERMIT ISSUANCE**

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND ACKNOWLEDGE THAT THIS INFORMATION IS A TRUE REPRESENTATION OF MY PROPOSED BUSINESS USE/OCCUPANCY.

Print name Signature of owner/authorized agent/tenant Date

#### **FOR OFFICE USE ONLY:**

Type of Construction: \_\_\_\_\_ Occupancy Group \_\_\_\_\_ Occupant Load: \_\_\_\_\_ Sq. Ft. \_\_\_\_\_

Fire Sprinklers: Yes \_\_\_ No \_\_\_ Necessary Inspections: Building \_\_\_ Fire \_\_\_ Backflow \_\_\_ Occupancy Use: \_\_\_\_\_