



City of Marlborough

BUILDING DEPARTMENT

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ROBERT F. CAMACHO - C.B.O.
BUILDING COMMISSIONER

PATRICK DAHLGREN
BUILDING INSPECTOR

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BUILDING INSPECTOR

RICHARD DESIMONE
PLUMBING & GAS INSPECTOR

JOHN CAIN
WIRING INSPECTOR

Application for a Certificate of Occupancy

“COMMERCIAL”

Information below is required so that an occupancy certificate can be issued. Only for projects that have received a “Building Permit”

1. **Street Address:**
2. **Location in Building: Floor- Suite:**
3. **Company Name Occupying the space:**
4. **Building Owner’s Name & Address:**
5. **Building Permit Number:**
6. **New Building/Addition: YES - ☐ NO - ☐**
7. **Existing Building-Fit up/Renovation – YES - ☐ NO - ☐**
8. **Edition of the Building Code Permit Was Issued Under:**
9. **Use Group:**
10. **Construction Type:**
11. **Occupant Load-by floor/section**
12. **Sprinklers: YES - ☐ NO - ☐**
13. **Special Conditions: i.e. Temporary CO/Why? _____ Expiration Date-**

Applicant shall attach the Building Permit and all the appropriate wet stamped final affidavits of completion from each of the appropriate Registered Design Professionals and their respective construction disciplines as they apply to this project. This request for a Certificate of Occupancy is verification the project meets or exceeds the current building code(s) and that all the appropriate Inspections have been completed.

This application is being completed and submitted by:

Name: (Print)

Title: (Print)

Signature/Date: