



City of Cleveland
Department of Building and Housing
 601 Lakeside Avenue, Room 517, Cleveland, Ohio 44114
FINAL INSPECTION(S) SIGN-OFF FORM

NOTE: REQUEST THAT EACH INSPECTOR COMPLETES THE APPROPRIATE PORTION OF THIS FORM WHEN A FINAL INSPECTION IS MADE. PLEASE COMPLETE THE INFORMATION BELOW AND SUBMIT THIS FORM AS YOUR REQUEST FOR A CERTIFICATE OF OCCUPANCY, TO ROOM 517, CLEVELAND CITY HALL, 601 LAKESIDE AVENUE, CLEVELAND, OHIO 44114

BUILDING PERMIT No. _____ PROJECT ADDRESS: _____
 AREA TO BE OCCUPIED: _____
 ISSUE TO: _____ CONTACT: _____
 ADDRESS: _____
 TELEPHONE No. _____ FAX No. _____ Email Address: _____

THE GENERAL CONTRACTOR/OWNER IS RESPONSIBLE FOR ENSURING THAT ALL CONSTRUCTION WORK COMPLIES WITH PERMITS ISSUED FOR THIS PROJECT, AND ALL INSPECTION RESULTS (INCLUDING ANY REQUIRED SPECIAL INSPECTION REPORTS) ARE SUBMITTED TO THE CHIEF BUILDING OFFICIAL FOR APPROVAL.

NO REQUIRED INSPECTIONS WILL BE MADE BY CITY INSPECTORS IF PERMITS AND APPROVED PLANS ARE NOT CONSPICUOUSLY POSTED AND READILY AVAILABLE AT THE JOB SITE AND FURTHER, THAT WORK SHALL BE STOPPED IF SAID CONDITIONS ARE NOT MET.

THE GENERAL CONTRACTOR/OWNER MUST ENSURE THAT EVERY SUB-CONTRACTOR ARRANGES FOR ALL INSPECTIONS REQUIRED BY ALL OTHER CITY AGENCIES TO FINALIZE ALL PERMITS NECESSARY FOR THE COMPLETION OF THE PROJECT. HE/SHE IS ALSO RESPONSIBLE FOR SEPARATELY CONTACTING THE FIRE PREVENTION BUREAU FOR INSPECTION UPON COMPLETION OF ALL WORK.

BUILDING PERMIT(S) CONTACT INSPECTOR ON PERMIT. THIS INSPECTION IS MADE AFTER ALL OTHERS			
Permit No(s)	Date Issued	Inspector (print/signature)	
_____	_____	_____	
() APPROVED FINAL	() APPROVED TEMPORARY*	() APPROVED PARTIAL*	DATE

PLUMBING PERMIT(S) 216.664.3618			
Permit No(s)	Date Issued	Inspector (print/signature)	
_____	_____	_____	
() APPROVED FINAL	() APPROVED TEMPORARY*	() APPROVED PARTIAL*	DATE

H.V.A.C. PERMIT(S) 216.664.3618			
Permit No(s)	Date Issued	Inspector (print/signature)	
_____	_____	_____	
() APPROVED FINAL	() APPROVED TEMPORARY*	() APPROVED PARTIAL*	DATE

ELECTRICAL PERMIT(S) 216.664.2616			
Permit No(s)	Date Issued	Inspector (print/signature)	
_____	_____	_____	
() APPROVED FINAL	() APPROVED TEMPORARY*	() APPROVED PARTIAL*	DATE

FIRE PREVENTION PERMIT(S) 216.664.6664			
Permit No(s)	Date Issued	Inspector (print/signature)	
_____	_____	_____	
() APPROVED FINAL	() APPROVED TEMPORARY*	() APPROVED PARTIAL*	DATE

***SEE INSPECTOR COMMENTS ON REVERSE SIDE**

ELEVATOR PERMIT(S) 216.664.2284			
Permit No(s)	Date Issued	Inspector (print/signature)	
() APPROVED FINAL	() APPROVED TEMPORARY**	() APPROVED PARTIAL**	DATE

HEALTH DEPARTMENT/ DIVISION of ENVIRONMENT PERMIT(S) 216.664.4769			
Permit No(s)	Date Issued	Inspector (print/signature)	
() APPROVED FINAL	() APPROVED TEMPORARY**	() APPROVED PARTIAL**	DATE

SIDEWALKS PERMIT(S) 216.664.2474			
Permit No(s)	Date Issued	Inspector (print/signature)	
() APPROVED FINAL	() APPROVED TEMPORARY**	() APPROVED PARTIAL**	DATE

WATER POLLUTION CONTROL PERMIT(S) 216.664.2513			
Permit No(s)	Date Issued	Inspector (print/signature)	
() APPROVED FINAL	() APPROVED TEMPORARY**	() APPROVED PARTIAL**	DATE

****SEE INSPECTOR COMMENTS BELOW**

INSPECTOR COMMENTS: CONDITIONS AND/OR TIME LIMIT OF APPROVAL

<p>TO REQUEST AN EXTENSION OF A TEMPORARY CERTIFICATE , SUBMIT A LETTER ADDRESSED TO THE Chief Building Official and include the following information:</p> <ul style="list-style-type: none"> The reason for extension of time request Planned date of construction completion Include permit #/permit issuance date/and address of the property Payment of \$60.00 for the 30 day extension of time

THIS IS NOT THE CERTIFICATE OF OCCUPANCY
Submit this completed form to Room 517 of Cleveland City Hall