

Date of Site Inspection: _____
Site Name: _____
Tax Parcel: _____

Certificate of Occupancy Checklist

- Third Party Inspection Approval
- Water Testing Results (If Well)
- Sewage Permit Signoff / Hook-up Signoff
- 70% Ground Cover Germination
- Property Monumentation
- Driveway Pave 20' past R.O.W.
- As-built (If Required) (Minimum of F.L.E.P.)
- Storm Sewer Requirements Met
- Conditions of Building Permit Satisfied (If Applicable)