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REQUEST FOR DUPLICATE OR REVISED OCCUPANCY PERMIT/CERTIFICATE

This form should be used to request duplicates or revised copies of previously issued occupancy permits or certificates (as long as no changes have been made in the building or its approved use).

All applicants should check one of the boxes in Part A and fill in all the information requested in Parts B and C. Failure to complete these sections may result in your application being returned to you. Part D on page 2 of this form only needs to be filled out if you are an owner or lessee and are seeking a revised Fire and panic Occupancy permit. When filling in part D, please be as specific as possible in describing the use of the building.

ACT 24 EXEMPTION

Part A: Type of Request	Fire and Panic Occupancy Permit <input type="checkbox"/> Duplicate <input type="checkbox"/> Revision: Change in owner name, building name or address	Certificate of Occupancy <input type="checkbox"/> Duplicate <input type="checkbox"/> Revision: Change in owner name, building name or address
	A request for a <u>change of address</u> must be accompanied by an address form supplied by the U.S. Postal Service or the local "911" Call Center.	
Part B: Building Information Political Subdivision and County names are required.	Please be certain that the building name and address information is correct, since it will appear on the revised permit/certificate exactly as written here. Facility Name (name of company, mall, institution, university, etc.): _____ Building and/or Tenant Name (or Building Number):_____	
	Street Number and Name: _____	City: _____ Zip Code: _____
	City: _____	Zip Code: _____
	Political Subdivision: _____ County: _____	
	Previous L&I File or MA Number(s): _____	
Part C: Applicant Information	Applicant Name: _____	
	Street Number and Name: _____	
	City: _____	Zip Code: _____
	Daytime Phone Number: _____	
	<input type="checkbox"/> Mail Occupancy Permit/Certificate to the address listed in this section.	
	<input type="checkbox"/> Email Occupancy Permit/Certificate. Email: _____	
Office Use Only	Check #: _____	Amount: _____ Paid To: _____

Part C: (continued)	<p>Check applicable box and sign.</p> <p><input type="checkbox"/> I am the owner of this building (or authorized representative for owner).</p> <p>Signature _____</p> <p>Printed Name _____</p> <p><input type="checkbox"/> I am the lessee of this building. (Signature of owner <u>must</u> also be included.)</p> <p>Signature of Lessee _____</p> <p>Printed Name of Lessee _____</p> <p>Signature of Owner _____</p> <p>Printed Name of Owner _____</p> <p><input type="checkbox"/> I am the Building Code Official (BCO) of the municipality that this building is located in.</p> <p>Signature _____</p> <p>Printed Name _____</p>
Part D: Building Use Certification	<p>As the owner or lessee, I certify that the building for which I am requesting a revised Fire and Panic Occupancy Permit will only be used for the following purpose and that I am making no changes which would require a building permit under the Uniform Construction Code:</p> <p>Purpose:</p> <p>Signature _____</p>

