
	<p>CITY OF DANA POINT</p> <p>COMMUNITY DEVELOPMENT BUILDING AND SAFETY</p> <p>33282 Golden Lantern, Suite 209 Dana Point, CA 92629 949 248-3594 www.danapoint.org</p>		A005 - TEMP C OF O
			2019 CALIFORNIA CODES <i>CODE CYCLE</i>
			01/02/2020 <i>EFFECTIVE DATE</i>
			<i>PERMIT NUMBER</i>
			<i>ISSUE DATE</i>
TEMPORARY CERTIFICATE OF OCCUPANCY APPLICATION			

Job Address: _____ Permit No. _____

Proposed Use: _____

Owner/Agent's Name: _____ Phone No. _____

Contractor's Name: _____ Phone No. _____

Reason for Temporary Occupancy: _____

Type: Temporary Residential Occupancy Open for Business Stocking Training Other

Items to be completed prior to final inspection and approval _____

This form, when approved, grants the issuance of a Temporary Certificate of Occupancy for a specific use or activity.

I the undersigned being the owner or owner's agent, agree to indemnify, defend and save free and harmless the City of Dana Point, it's officers, agents, employees and representatives from and against any and all claims, demands, loss, actions or causes of action which may be asserted, prosecuted or established against them or any of them, or whatsoever kind of nature, arising out of or attributable to, or in any manner connected with the temporary occupancy. I further acknowledge that the issuance of a Temporary Certificate of Occupancy requires that completion of construction be done in a timely manner and that all utilities may be turned off for any hazardous conditions or for not completing the construction. I intend to complete work and obtain the Certificate of Occupancy by: _____

Owner or Authorized Agent (Print) Phone no. E-mail Address

Owner or Authorized Agent (Signature) Date

FOR OFFICE USE ONLY

Approval Denial _____

Building Official's Signature Date

Planning Division Release Date

Public Works Release Date