



CERTIFICATE OF OCCUPANCY / TEMPORARY CERTIFICATE OF OCCUPANCY

The following information details the process and requirements for requesting a Certificate of Occupancy (CofO) or a Temporary Certificate of Occupancy (TCO) from the Building Officer. Please contact the City's Inspection Services at 310.458.2201 ext. 8101 or buildingandsafety@smgov.net for additional information.

Certificate of Occupancy

Pursuant to SMMC Section 8.08.130, a Certificate of Occupancy from the Building Officer is required prior to the initial use or occupancy of a building or newly added floor area; or prior to a change in occupancy/use. Both of the following are required prior to submitting a Certificate of Occupancy application for consideration by the Building Officer:

1. City Business License

All contractors and subcontractors who worked on the project must have a valid City of Santa Monica business license for the dates in which any work was performed. Verification of required business licenses must be cleared by the City's Revenue Division prior to scheduling of a final inspection for the project by submitting the [Business License Contractor Requirements](#) form at least two days prior to requesting a final inspection.

2. Final Inspection Approvals

All building permits require final inspection approval from Building & Safety. Other City Departments or Divisions may also require a final inspection approval prior to completing a project and submitting a Certificate of Occupancy application to the City. Refer to the [Permit Packet](#) provided to the permit holder at time of permit issuance for instructions on how to view required final inspections for your project.

Temporary Certificate of Occupancy

A TCO may be issued under particular circumstances for distinctive projects at the discretion of the Building Officer, and under the recommendation from the Fire Department.

Fire Department

The Fire Department requires the following prior to recommending the consideration of a TCO to the Building Officer:

- Fire sprinkler permit final sign-off
- All exit paths and corridors are clear, unobstructed, and lead directly to a public way.
- Legible address (min. six-inches high for exterior and four-inches high for interior) posted on the front and rear of building with contrasting background that that are clearly visible from the street.
- Fire alarm permit final sign-off
- All corridors, stairwells, and elevator lobbies posted with approved exit signage.
- If required:
 - Operational fire command room
 - Operational smoke and ventilation control system
 - Operational fire fighters phone system
 - Emergency generator acceptance test
 - Fire pump acceptance test
 - Emergency lighting system
 - Method B

Building and Safety

The Building & Safety Division requires the following for the Building Officer's consideration of a TCO request:

- Final sign-off for Mechanical, Electrical, and Plumbing
- All Life-Safety elements completed and approved
- Fire Department approval
- All required parking is in place
- All required ***final*** reports submitted to assigned Building & Safety inspector (e.g. Structural, Special Inspection, Soils, Stair Pressurization, Air Balance, Steel Certifications from Los Angeles City Fabrication Shop, Tenant Means and Methods Plan, Insulation Certification, Height Survey, Noise Tests)
- All structural components completed and approved
- All Accessibility features completed and approved
- Permanent installation of all utilities
- Approval from other required City Departments/Divisions

A Certificate of Occupancy or Temporary Certificate of Occupancy application may be submitted in person at the [Permit Services Center](#) in Room 111 of City Hall, or emailing completed application to buildingandsafety@smgov.net



CERTIFICATE OF OCCUPANCY APPLICATION

request for a certificate of occupancy or temporary certificate of occupancy.

JOB ADDRESS _____

ASSOC. BUILDING PERMIT NUMBER _____

Name of Permit Holder	Name		Phone		
	Address		Unit	City	
	State	Zip	Email		
Property Owner	Name		Phone		
	Address		Unit	City	
	State	Zip	Email		
Contractor (if different from permit holder)	Contact Name		Company Name		Phone
	Address		Unit	City	
	State	Zip	Email		

COMPLETE ALL OF THE FOLLOWING

Type of Request	Cert. of Occupancy <input type="checkbox"/>	Temp Cert. of Occ. <input type="checkbox"/>	Reason for Certificate	New Development <input type="checkbox"/>	Addition <input type="checkbox"/>	Change of Use <input type="checkbox"/>	Requested Occupancy Date
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Project Data	Project description (as it appears on building permit)											
	Activities and operations requested as part of TCO, if applicable:											
	Proposed Building Use	Single-Family Residential <input type="checkbox"/>	Multi-Family Residential (identify number of units) <input type="checkbox"/>	Retail <input type="checkbox"/>	Restaurant <input type="checkbox"/>	Office <input type="checkbox"/>	Other (specify) <input type="checkbox"/>					
	No. of Parking Spaces	Total	Standard	Compact	Van Accessible	Non-Van Accessible	Loading	Building Height	Feet	Stories		

Construction Data	Sprinkler Type	Non-Sprinkler <input type="checkbox"/>	Full Sprinkler <input type="checkbox"/>	Partial Sprinkler <input type="checkbox"/>	Constr. Type	I-A <input type="checkbox"/>	I-B <input type="checkbox"/>	II-A <input type="checkbox"/>	II-B <input type="checkbox"/>	III-A <input type="checkbox"/>	III-B <input type="checkbox"/>	V-A <input type="checkbox"/>	V-B <input type="checkbox"/>	Other
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I certify that I have read and fully understand the detailed requirements of this application, and state under penalty of perjury, under the laws of the State of California, that the above information and associated project plans is true and correct. I agree to comply with all City, county, and state laws and ordinances related to building construction and hereby authorize representatives of the City and county to enter upon the above-mentioned property for inspection purposes. I realize that this application is a permit request and it does not authorize the work specified herein. Further, neither the City nor any board, department officer or employee thereof make any warranty nor shall be responsible for the performance, or results of any work described herein.

ROLE OF THE UNDERSIGNED IS (CHECK ONE): OWNER CONTRACTOR OTHER _____

Name _____ Signature _____ Date _____

STAFF USE ONLY

Date Received:	Received by:	Assigned to:	Final Date:	Date Completed:
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