



Marion County Building Department
2710 East Silver Springs Boulevard
Ocala, Florida 34470
Phone: (352) 438-2400 Fax: (352) 438-2401
On the Web: www.marioncountyfl.org/building.htm

TEMPORARY-CONDITIONAL-PARTIAL CERTIFICATE OF OCCUPANCY REQUEST

Building Permit Number: # _____

Dear Building Director:

The undersigned requests a temporary-conditional-partial Certificate of Occupancy for a period not to exceed _____ days.

Requirements for the execution of this Certificate of Occupancy:

1. All fees paid
2. All final inspections performed and passed, except for "Final Structural"

Location: _____

I understand that if the above request is granted, a temporary power release will be given for the period of time stated above. I also understand that if the time limit is exceeded, I may be subject to a Code Enforcement Department violation.

Specific Reason(s) for Temporary Certificate of Occupancy:

Name _____ Date _____
Print Name of Homeowner or Contractor

Signature of Homeowner or Contractor

Approved? Yes No

By: _____ Date _____