



DEVELOPMENT SERVICES DEPARTMENT

6015 Glenwood Street ■ Garden City, Idaho 83714
 ■ planning@gardencityidaho.org ■ www.gardencityidaho.org
 ■ Phone 208/472-2921 ■ Fax 208/472-2996

Certificate of Occupancy Request

When requesting a certificate of occupancy, please submit this completed form. The information on this form will be verified, and if your project is determined to be complete a Certificate of Occupancy will be granted within 1 working day.

NOTE: Any changes to the approved plans must be submitted for plan modification review and approval to building@gardencityidaho.org prior to completion of this report.

Permit No.: _____ Project Name: _____

Name: _____

Company: _____

Inspections		
	Permit number	Date completed
Final Plumbing inspection		
Final Mechanical inspection		
Final Electrical inspection		
Final Fire inspection		
Final Building inspection		
Final Design and Planning inspection		
Final ESC inspection		
Final Elevation Certificate		
Other		
ACHD Impact fee receipt or verification that no impact fees are due	Date submitted to City:	
All fees have been paid	Yes / No	

All conditions of approval (found in decision documents for conditional use permits, variances, design review, etc.) have been met	Yes / No	
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I (print name), _____, the project's _____ (design professional, general contractor, applicant, etc.), verify that that all the statements made are correct and true, and that the referenced project is constructed as approved.

Date: _____

Signature: _____

Stamp with Seal & Sign