



# Town of Andover Building Department

36 Bartlet Street Andover, MA. 01810  
Office: 978-623-8620 Fax: 978-623-8692

## Application for Certificate of Use/Occupancy/Re-Occupancy

(Application is required for 780 CMR Controlled Construction Projects only)

Building Address:	Suite Number(s):
Building Permit Number:	Application Date:
Tenant's Name:	
Describe space for which occupancy is being requested:	
Floors to be Occupied:	Size of tenancy: S.F.
<b>This project would best be described as:</b> Newly Constructed Building    Addition    Alteration    Repair Remodel    Change of Owner    Additional Occupant Change of Occupant - Formerly occupied by:	
Change of Use – Use separate sheet to describe prior use and prior/new hazard index numbers	
Brief Summary of Work Performed:	

<b>Building Code Information (to be completed by Architect or Engineer of Record):</b>											
<b>Building Code Edition:</b>						<b>Live Loads:</b>					
<b>Use/Occupancy:</b>											
<b>Use Group:</b>	<b>A-1</b>	<b>A-2</b>	<b>A-2nc</b>	<b>A-3</b>	<b>A-4</b>	<b>A-5</b>	<b>B</b>	<b>E</b>	<b>F-1</b>	<b>F-2</b>	
	I-1	I-2	I-3	M	R-1	R-2	R-3	S-1	S-2	U-Utility	
<b>Mixed Use (Describe uses on separate sheet, indicate if non-separated or separated, indicate fire rating)</b>											
<b>Special Use (specify):</b>											
<b>Type of Construction:</b>	<b>1A</b>	<b>1B</b>	<b>2A</b>	<b>2B</b>	<b>3A</b>	<b>3B</b>	<b>4</b>	<b>5A</b>	<b>5B</b>		
<b>Occupant Load Per Floor:</b>	<b>Basement</b>		<b>First Floor</b>		<b>Second Floor</b>		<b>Third Floor</b>				
If several spaces are involved, attach 8 1/2" x 11" basic floor plan(s) and seating plan (where applicable) with occupant load listed on plan for each space. Plan must be certified by Architect/Engineer of record. Occupant Loads are posted per 780 CMR											
<b>The following documents must be submitted with this application (where applicable):</b>											
Controlled Construction final affidavits:    Attached    Not Required – Explain on separate sheet											
As-built drawings (required per 780 CMR 903.1.4 and wherever project varies from approved plans): Attached    Not Required – Explain:											
As-built plot plan (including utilities):    Attached    Not Required – Explain on separate sheet											

<b>AFFIDAVIT:</b> I hereby certify that I am the architect/engineer of record for the above referenced project and that the information provided, to the best of my knowledge, information and belief, is complete and correct:  Signature of Architect/Engineer of Record: _____  Printed Name of Architect/Engineer of Record: _____  Company Name: _____  Address: _____  Phone: _____	<b>Arch./Engineer Seal</b>
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**Please include all documents in PDF format and upload into the Building Permit**

**Where a Certificate of Occupancy is required by 780 CMR, the space may not be occupied until Certificate of Occupancy has been issued.**

Address:		Tenant's Name	
Suite Number:	Building Permit Number:	Application Date:	
<b>OFFICE USE ONLY</b>			
Date Received:		Received By:	
Receipt No.:		Fee:	
<b>TEMPORARY OCCUPANCY</b>			
Inspection Date:		Approved By:	
Temporary C.O. Issued (Date):			
Expiration Date:			
Conditions of Temporary Occupancy:			
Conditions of Temporary Occupancy:			
<b>FINAL OCCUPANCY</b>			
Inspection Date:		Approved By:	
Final C.O Issued (Date):			
Conditions of Certificate of Occupancy:			