



Certificate of Compliance

Request for Certificate of Occupancy or Certificate of

PROJECT INFORMATION

City of Tampa Record ID (Permit) Number:

Project Address:

PRIVATE PROVIDER

Name of Firm:

Name of Qualifier: _____

License Number:

Office Phone: _____ Cell Phone:

Email:

I HEREBY ATTEST that to the best of my knowledge, belief and professional judgment, the building components and site improvements captioned above have been inspected under my authority, as indicated in the inspections report, and have been completed in substantial compliance with the approved documents, plans, revisions, and applicable codes; and, I FURTHER ATTEST that to the best of my knowledge, belief and professional judgment, there are no known issues relating to life safety which would preclude the issuance of the following:

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Certificate of Occupancy

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Temporary Certificate of Occupancy (TCO)

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Certificate of Completion

☐

Temporary Use Authorization (TUA)

☐

Partial Certificate of Occupancy (PCO)

Printed or Typed Name of Private Provider Qualifier
Provider Qualifier

License No.

Signature of Private

NOTARY

Certificate of Compliance

Request for Certificate of Completion on Private Provider Trade Permits

STATE OF FLORIDA

COUNTY OF _____

SWORN TO (OR AFFIRMED) AND SUBSCRIBED before me this _____ day of _____,

20____, by _____ (name of person making statement).

Signature of Notary Public – State of

Florida

(NOTARY SEAL)

Printed or Typed Name of Notary Public

Rev 3/2/22