Agency sign-offs for Temporary Certificate of Occupancy (TCO)
(All except One and Two Family Dwelling TCOs)

The Virginia Uniform Statewide Building Code, Section 116.1.1 states the following: Temporary certificate of occupancy. Upon the request of a permit holder, a temporary certificate of occupancy may be issued before the completion of the work covered by a permit, provided that such portion or portions of a building or structure may be occupied safely prior to full completion of the building or structure without endangering life or public safety.

These sign-offs must be obtained and submitted to the Building Inspector for the project for which the TCO will apply. This form must be completed for each Temporary Certificate of Occupancy Requested.

Please allow at least one business day following Final Building Commissioner Approval for processing. The cost for each TCO is $600.00, payable at time of TCO issuance. TCOs are renewable for each 30-day period that the TCO is active. It is the sole responsibility of the TCO applicant for renewal of the TCO. Should the TCO not be renewed by the expiration date (30 days past the issuance date), the TCO will be revoked and the applicant notified. All TCOs will become null and void upon issuance of the permanent Certificate of Occupancy.

All approval signatures below must be obtained by the TCO applicant prior to project consideration for a TCO.

Project Address:_______________________________________________________________

Unit(s)/Suite(s)/Floor(s)________________________________________________________

Project Building Permit number: B-_______________________

TCO Applicant (Building permit holder) (Print):____________________________________

Fire Prevention Bureau Approval signature:______________________________________Date:________
NFP (757) 664-6604
Notes:________________________________________________________________________

Lead Building Inspector Approval signature:______________________________________Date:_______

Notes:________________________________________________________________________

Submitted to Building Inspections Team Lead, initials________________________Date:_______