Building Department  
Town of Suffield

APPLICATION FOR CERTIFICATE OF OCCUPANCY  
(This application must be legibly filled out in ink or typewritten)

Building Permit # _______________  
Date _______________

1. Location, Street and No. _________________________________________________

2. Owner/Application, Name and Address _____________________________________

_______________________________________________________________________

3. Part of Building to be occupied: Whole _____ Part _____
Which part ____________________________________________________________

4. Major use of occupancy ________________________________________________

_______________________________________________________________________

APPROVALS  
This section for Official Use Only

1. Zoning _______________________________________________________________
   Comments _________________________________________________________

2. Engineering/Site Plan __________________________________________________
   Comments _________________________________________________________

3. Water Test/Permit to Discharge _________________________________________
   Comments _________________________________________________________

4. Fire Marshall _________________________________________________________
   Comments _________________________________________________________

5. Water Pollution Control Authority ______________________________________
   Comments _________________________________________________________

6. Others ______________________________________________________________
   Comments _________________________________________________________

NOTE TO APPLICANT: Occupancy before issuance of a Certificate of Occupancy is a violation of the Connecticut State Building Code.