



WASHTENAW COUNTY BUILDING INSPECTION

705 N. Zeeb Road • Ann Arbor, MI 48103

Phone: (734) 222-3900 • Fax: (734) 222-3930 • Inspections: (734) 222-3720

www.ewashtenaw.org

RESIDENTIAL CERTIFICATE OF OCCUPANCY REQUEST

Date Requested: _____

When Required: _____

Project Location: _____

Township/City: _____

Contact Person: _____

Phone: _____

BUILDING	ELECTRIC	PLUMBING	MECHANICAL
*FTG	UNDGRND	UNDGRND	PRE-FAB RGH
*FND REINF	TEMP SRVC	*SEWER	PRE-FAB FINAL
*BKFL	*PERM SERV	WATER	PRE-FAB GAS TEST
*SBSL	*RGH	*RGH	UNDERGROUND
*RGH	*FINAL	*SHOWER PAN	*RGH
*INSL	RGH LOW VOLTAGE	*FINAL	*FINAL
*MASONRY	FINAL LOW VOLTAGE	*WTR SOFTENER	*GAS PRES.TEST
*FINAL			* LP TANK/LINE**
*SET BACK FOR AUGUSTA/LODI			*RADIANT FLOOR

*These inspections are usually required. The exceptions depend upon the type of project and/or type of structure.

BLDG: \$ _____ ELEC: \$ _____ PLBG: \$ _____ MECH: \$ _____

Building Permits: Projects of \$20,000 and above, a maximum of (6) inspections. Projects under \$20,000, a maximum of (3) inspections. Any number of inspections over the maximum will be charged for at \$50 each.

WAITING FOR/ISSUES: _____

BUILDER'S LICENSE _____

TYPE OF HEAT:

- _____ Natural Gas
- _____ LP Gas** If LP Gas, a Mech. Permit & inspection are required for LP Tank & Line.
- _____ Geo-Thermal Heat (No gas test required)
- _____ Type of Backup System for Geo Thermal
- _____ Pre-Fab Fireplace Manufactured Home factory installed
- _____ Radiant Floor-Boiler

OTHER DOCUMENTATION:

- _____ Modular Homes: State Building Systems Approval Report. (ie. only If constructed to state code)
- _____ Elevators State Approval
- _____ Loch Alpine Sanitary Auth. (LASA) / Multi-Lake / Portage Lake - Final Inspection Form
- _____ Insulation Certificate/Energy Report
- _____ Health Approval Documentation
- _____ Final Zoning Documentation – Required by: **City of Dexter, Scio Twp. & Webster**

There may also be other specific documentation required. You will have to read each inspection result to determine what, if any, other documentation is necessary before C of O is issued.

****A TEMPORARY OCCUPANCY CANNOT BE ISSUED WITHOUT SUPERVISOR'S APPROVAL****

****TEMPORARY CERTIFICATE OF OCCUPANCY A FEE OF \$200.00 PER MONTH****

****HEALTH MUST ALSO ISSUE AT LEAST A TEMPORARY APPROVAL****

¹ Revised 5/23/16 REG