

CITY OF DECATUR, TEXAS

1601 S. State Street Decatur, TX 76234
Phone 940-393-0250 Inspections Line 940-393-0259 * email: development@decaturtx.org

Certificate of Occupancy Application Permit #: Permit Fee: \$____ Received by: _____

Date

SUBMIT FOUR (4) COPIES OF DIMENSIONED FLOOR PLANS AND ROOM SIZES – CLEARLY MARKING EXITS THIS APPLICATION IS TO ALLOW OCCUPANCY TO A SPECIFIED SPACE IN ORDER TO CONDUCT BUSINESS. ANY ALTERATIONS WILL REQUIRE A SEPARATE PERMIT TO BE SUBMITTED IN CONJUNCTION WITH THIS APPLICATION
** A CO TO SHOW IS STRICTLY FOR THE RELEASE OF UTILITIES NOT INTENDED FOR OCCUPANCY

| INCOMPLETE APPLICATION AND/OR SUBMITTAL WILL DELAY THE REVIEW PROCESS. | | | | | |
|---|----------------------------|---|---------------|------------------|------------|
| REASON FOR CERTIFICATE OF OCCUPA | NCY: | | | | |
| ☐ New Business | ☐ New Business Owner | ☐ To be done at Final Inspection | | | |
| ☐ Business Name Change | ☐ Temporary/Seasonal | ☐ CO To Show ** (Permitted over the counter NO PLANS REQUIRED) | | | |
| BUSINESS INFORMATION: | | | | | |
| Sales Tax ID: | | Business Ph | one #: | | |
| Business Address: | | | | Suite #: | |
| Name of Business as it is to appear on CO: | | | | | |
| Type of Business: | | Nature of Business: | | | |
| Total Sq. Ft.: Dining Sq. I | Ft. (if applicable): | # of Parking Spaces Provided: | | | |
| Flood Zone: Zoning: | | Construction Type: # of Stories: | | | s: |
| GENERAL INFORMATION | | | | | |
| FOOD ESTABLISHMENT: Yes No | FIRE SPRINKLERS: | ☐ Yes | □ No | ALCOHOL SALES: | ☐ Yes ☐ No |
| Does your occupa | ncy or business involve st | orage, sale, c | or use of the | following items? | |
| Flammable or combustible liquids (10 gal. or more |) | High piled storage of combustible items | | | ☐ yes ☐ no |
| Dust producing equipment or materials | ☐ yes ☐ no | Compressed gases | | ☐ yes ☐ no | |
| Explosives or ammunition | ☐ yes ☐ no | Fireworks | | ☐ yes ☐ no | |
| Magnesium | ☐ yes ☐ no | Paint/flammable material | | | ☐ yes ☐ no |
| Poisonous or hazardous chemicals or acids | ☐ yes ☐ no | Liquid Petroleum gas ☐ yes ☐ no | | | ☐ yes ☐ no |
| Obtain Certificate of Occupancy by: | ☐ Mail | | | | |
| If you are requesting to have the CO mailed, please indicate the location to send to: | | | | | |
| APPLICANT INFORMATION | ☐ Property Owner | ☐ Business | s Owner | Other: | |
| Applicant Name: | | | Phone Nu | mber: | |
| Address: | | Email Address: | | | |
| City: | State: | Zip: | | Cell Phone #: | |
| TENANT / BUSINESS OWNER INFORMA | ATION: | | | | |
| Tenant / Business Owner Name: | | | | Phone #: | |
| Address: | | Email Address: | | | |
| City: | State: | Zip: | | Cell Phone # | |
| PROPERTY OWNER INFORMATION: | | | | | |
| Property Owner Name: | | | | Phone #: | |
| Address: | | | Email Ad | ddress: | |
| City: | State: | Zip: | | Cell Phone # | |
| | | | | | |

Applicant's Signature

Applicant's Name (Please Print)



CERTIFICATE OF OCCUPANCY GUIDELINES

Decatur Fire Department Requirements for Certificate of Occupancy Inspection

ALL FIRE INSPECTION REQUESTS MUST BE MADE THROUGH FIRE ADMINISTRATION 48 HOURS IN ADVANCE

CALL 940-627-3199 MONDAY - FRIDAY, 8:00am - 5:00pm

- Fire Extinguishers (2A: 10B: C minimum size) shall be provided with a maximum 75-foot travel distance to an extinguisher from any point in the space and kept accessible. Extinguisher locations shall be identified with signs.
- Address shall be posted in a position to be plainly visible from the fronting street in minimum sixinch (6") numbers on contrasting background. Address shall also be posted on outside of rear door(s) and on electrical meter bases and AC unit disconnects.
- Provide a key to the suite/building to be put in the Knox box (if one is already installed on the building) for emergency access. If not installed, one must be. Go to www.knoxbox.com for ordering, minimum 3200 series.
- 4. Exit lights are required to clearly indicate the direction of egress travel in accordance with the International Building Code.
- 5. Emergency lighting is required to illuminate the means of egress at an intensity of not less than one foot-candle at the floor level.
- 6. There can be no locking or latching devices on doors with panic hardware.
- 7. Electrical panels shall be completely labeled with breaker schedules.
- 8. Fire Lanes & Striping must be clearly marked or installed if required.
- Fire Prevention CO Inspections are conducted when a business is ready to OPEN. The provided items are only a small portion of item's inspected but are the most common.

For questions, please contact Fire Prevention at 940-627-3199 or prevention@decaturfd.com