## **CERTFICATE OF OCCUPANCY**

**1. CERTIFICATE NUMBER** 

2. (UM Project Number)

3. PROPERTY NAME	4. PROPERTY ADD	RESS	5. CITY, STATE, ZIP CODE
6. UM REPRESENTATIVE		7. SPECIFIC AREA OF BUILDING FOR THIS CERTIFICATE	
8. APPROVED USES		9. PREVIOUS USES	
10. APPROVED OCCUPANCIES		11. PREVIOUS OCCUPANCIES	
12. TYPE: (Check One) 13. BUILDING CODE   Image: Description Image: Description   Image: Description Image: Description   Image: Description Image: Description		NAME & EDITION	14. DESIGN OCCUPANT LOAD
15. OCCUPIED AREA (Square F	eet) 16. SPRINKLERS REQUIRED		18. TYPE OF CONSTRUCTION
19. DESCRIPTION OF USE			
20. SPECIAL STIPULATIONS OR CODE MODIFICATIONS			
This certificate ensures that all fire protection and life safety systems have been completed, inspected, successfully tested and approved for the specific area of the building specified above to provide a reasonable degree of safety to occupants from fire and similar emergencies.			
21. NAME OF UM REPRESENT	ATIVE 22. SIGNATURE		23. DATE

THIS CERTIFICATE IS VALID ONLY FOR THE PREMISES OF THE PROJECT ADDRESS