

# Temporary/Partial Certificate of Occupancy

## City of Rensselaer Building Department

124 S. Van Rensselaer St., PO Box 280  
Rensselaer, IN 47978  
Kevin Cochran, Building Commissioner  
Phone # (219) 866-2311 Fax # (219) 866-7551  
[kcochran@cityofrensselaerin.com](mailto:kcochran@cityofrensselaerin.com)

Request for ☐ Temporary ☐ Partial Certificate of Occupancy

Contractor \_\_\_\_\_  
Address of Project \_\_\_\_\_  
Requested by \_\_\_\_\_  
Reason for Request \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**If Temporary Certificate of Occupancy;** The length of time Temporary Certificate of Occupancy is requested for is \_\_\_\_\_ days. List all items remaining to be completed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**If Partial Certificate of Occupancy;** Define area of project Partial Certificate of Occupancy of requested for (provide sketch if necessary). \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

List all associated permits and status. If permits are not finalized, inspector's signature is required. Building Inspector signature is MANDATORY.

Applicants Signature \_\_\_\_\_ Date \_\_\_\_\_

*For Office Use Only*

Permit Number

Type

Finalized Y/N

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

Application was \_\_\_\_\_ Approved \_\_\_\_\_ Denied, by me this day of \_\_\_\_\_, 20\_\_\_\_  
Permit No. \_\_\_\_\_ Permit Fee \$ \_\_\_\_\_

**City of Rensselaer**

\_\_\_\_\_  
Kevin Cochran, Building Commissioner



Sketch here if needed: