APPLICATION FOR OCCUPANCY

DISTRICT NAME AND NUMBER			
		GENERAL CERTIFICATE OF	FOCCUPANCY
FACILITY NAME		CERTIFICATE OF PARTIAL	OCCUPANCY
		CERTIFICATE FOR A VEHIC	CULAR FACILITY
FACILITY LOCATION		CERTIFICATE OF TEMPORA	ARY OCCUPANCY
		New Use - Bldg Permit #	
☐ Property is owned by the district.		New Construction - Project #	Bldg Permit #
☐ Property is not owned by district (Attach	Owner	Addition - Project # Bldg	g Permit #
Authorization)		Renovation/Repair - Project #	Bldg Permit #
	III. ARCHITECT/ENGIN	EER'S CERTIFICATION	
To the best of my knowledge and belief (check and complete applic	able statement):	
compliance with Part 180. The INS RECORDS have been submitted to, Superintendent during and/or upon of the superintendent during and/or upon or the submittendent during and/or upon or the submittendent during and superintendent during and the Temporary general health and safety of the stude of the stude of the submittendent during and superintendent during and the Temporary general health and safety of the work is in full compliance with Part 180. INSPECTION RECORDS have been Regional Superintendent during and the theorem and the statement, as selected above, is valid that date may render this statement invalidation. Date Architect/Engineer Name	and the CALLED INSPEctompletion as applicable to apply fully with the requirement of the attached TEMPORA by Facility Checklist), I here lent and others who occupy the within the above named The INSPECTION STA en submitted to, and the CALOR upon completion as applicable of the day of the survey.	CTIONS RECORDS have been reported the work. The ments of Part 180. However, based RY FACILITY REPORT (include by certify that such noncompliance the facility. The facility on/ I find a TEMENTS and the CONFIRMATALLED INSPECTIONS RECORD plicable to the work. The ments of Part 180. However, based and the facility of the work.	d upon my survey of the above es the Temporary Facility the does not jeopardize the and hereby certify that the work FION OF CALLED OS have been reviewed by the
	- N. V. I		
License Number	Phone Number SCHOOL DISTRIC	Expiration Expiration	on Date
We hereby certify that this application act the above named facility for the primary p	_	- ·	
the above named racinty for the primary p	ourpose or.		
Date President of the Board of E	ducation	Date District Su	perintendent
	FOR REGIONAL SUI	PERINTENDENT'S USE	
INSPECTION RECORDS: Date Reviewed:/_	/		
INSPECTION STATEMENT: Date Received:			
CONFIRMATION OF CALLED INSPECTION RE		·	
An inspection was made or caused to be made above named facility on/ Any the permit was notified of the discrepancies. I	e upon the completion of the v	work and before issuance of a CERTIF construction documents and building personal control of the	ermits were noted, and the holder of
Date Regional Superinter	ıdent		

(1/11) Form 36-15 (Prescribed by Regional Superintendent for local board use)

INSPECTION STATEMENTS

Illinois Elevator Safety Inspection Statement 2008 OSFM Illinois Elevator Safety Rules (71 Ill. Adm. Code 400) Effective May 27, 2008

2008 OSFM Illinois Elevator Safety	Rules (71 Ill. Adm. Code 400) Effe	ctive May 27, 2008			
Based upon my survey of the project at or within the					
Design Professional Name	Firm				
Design Professional Signature	Date	(Seal)			
IBPVS 3 2004 OSFM Boiler and Pressure Vessel Safety	Inspection Statement Rules (41 Ill. Admin. Code 120) F	Effective September 24, 2004			
Based upon my survey of the project at or within hereby certify that the project has been inspected a Rules (41 Ill. Adm. Code 120), Effective September	as required by the 2004 OSFM E	(facility name), I find and Boiler and Pressure Vessel Safety			
Design Professional Name	Firm				
Design Professional Signature	Date	(Seal)			
	aspection Statement 7 Ill. Admin. Code 890) Effective at the as required by the 2005 Illinois I	(facility name), I find and			
Design Professional Name	Firm				
Design Professional Signature	Date	(Seal)			

(1/11) Form 36-36 (for use in confirming inspections have been conducted for other Illinois Agency codes)

CONFIRMATION OF CALLED INSPECTION RECORDS

2009 Intern			

	Called Inspection Type	Approval to Proceed Date	A/E or Qualified Inspector Signature	ISBE ID Number or A/E License Number
1.	Footing			
2.	Foundation			
3.	Concrete Slab / Under-floor			
4.	Lowest Floor Elevation			
5.	Framing			
6.	Lathe and Gypsum Board			
7.	Fire Resistant Penetrations			
8.	Energy Efficiency			
9.	Special Inspection			
10.	Final IBC			

2009 International Electrical Code (Appendix K) Called Inspection Records

	Called Inspection Type	Approval to Proceed Date	A/E or Qualified Inspector Signature	ISBE ID Number or A/E License Number
1.	Prefabricated Assembly			
	Evaluation Report			
2.	Underground			
3.	Rough-in			
4.	Final IEC			

2009 International Energy Conservation Code Called Inspection Records

	Called Inspection Type	Approval to Proceed Date	A/E or Qualified Inspector Signature	ISBE ID Number or A/E License Number
1.	Foundation (thermal envelope)			
2.	Framing (thermal envelope)			
3.	Insulation (thermal envelope)			
4.	Rough-in "Okay to Cover" (mechanical, service water heating, electrical, lighting)			
5.	Final (mechanical, service water heating, electrical, lighting)			
6.	Final IECC			

2009 International Fire Code Called Inspection Records

	Called Inspection Type	Approval to Proceed Date	A/E or Qualified Inspector Signature	ISBE ID Number or A/E License Number
1.	Final IFC			

2009 International Mechanical and Fuel Gas Code Called Inspection Records

	Called Inspection Type	Approval to Proceed Date	A/E or Qualified Inspector Signature	ISBE ID Number or A/E License Number
1	Prefabricated Assembly			
1.	Evaluation Report			
2.	Underground Piping			
3.	Rough-in			
4.	Final IMC & IFGC			