



Building & Development Services
Permitting Section
1112 Manatee Ave W 4th Floor
Bradenton, FL 34205
Phone: (941) 748-4501
www.mymanatee.org

TEMPORARY CERTIFICATE of OCCUPANCY REQUEST

POLICY:

As per the Manatee County Building Code, "a Temporary Certificate of Occupancy (TCO) may be issued for a portion or portions of a building which may be safely occupied prior to final completion of the building." As per the Manatee County Land Development Code, "a Temporary Certificate of Occupancy (TCO) may be issued for a period of time not to exceed six (6) months".

Justification for the request must be approved and the building deemed safe for occupancy prior to issuance of a TCO.

The Building Official or designated representative shall have the discretion to issue a TCO based upon circumstances of hardship.*

* **Hardship** - shall be defined for the purposes of this Policy to mean: circumstances beyond the permit holder's control, and/or not a result of said person's action or inaction.

PROCEDURE: **Commercial or Residential**

1. Submit a Letter of Request, form #BDI-3, to the Building Official or designated representative for application approval based on hardship*.
2. Pay an application fee of \$100.00 - per 30 calendar days.
3. All fees shall be paid prior to continuing with written request. Fee is payable to Manatee County.
4. Submit to Permitting personnel, properly executed:
 - A. Approved Letter of Request (form #BDI-3).
 - B. Temporary Certificate of Occupancy (TCO) request (form #BDI-1).
 - C. General Information Sheet (form #BDI-2).
4. It is the **Applicant's** responsibility to see that **ALL** departments are released, inspections are requested and made, holds are released, all fees paid and Inspection Coordination is notified.
5. Direct **ALL** questions pertaining to Temporary Certificate of Occupancy (TCO) to the Inspection Coordinator ONLY, at **(941) 748-4501** EXT 3874 OR EXT 3875.

After the above is accomplished, the request shall be forwarded to the Building Official or his designated representative for review and approval.

* **There shall be NO occupancy until you are notified by Inspection Coordination that the TCO has been issued.**

REQUEST for TEMPORARY CERTIFICATE of OCCUPANCY

I hereby certify that I am the owner(s) of the property located at: _____

Permit Number #: _____

Further, I hereby request that you grant temporary use and occupancy of said property for the following reasons: OCCUPANCY _____ STOCKING ONLY _____
for the period from _____ to _____.

Further, I hereby acknowledge that this Temporary Occupancy is granted prior to our full and complete compliance with all applicable Codes and Ordinances. I further agree to accept sole responsibility for the safety of all persons entering thereon and hold harmless Manatee County or any of its employees from any and all claims for damages resulting there from.

I further agree to pay for any re-inspection that may be required to determine completion of Code requirements.

I further agree to immediately vacate said property upon notice from the Building Department if all requirements have not been complied with by the expiration of this Temporary Certificate of Occupancy (TCO).

WITNESS

OWNER(S)

CONTRACTOR of RECORD: _____

SIGNATURE: _____

STATE OF FLORIDA
COUNTY OF MANATEE

The foregoing instrument was acknowledged before me this ____ day of _____

20__, by _____, who is personally known to me () or has
provided the following identification _____.

Expiration Date: _____ and who did/did not take an oath.

Notary Public Signature _____ Notary Public Stamp Here



LETTER of REQUEST

RE: PERMIT NO: _____

JOB ADDRESS: _____

OWNER(s) NAME: _____

Applicant shall explain specifically **all** reasons why a TCO is necessary. Include time period for which a TCO is requested. **MAXIMUM** time allowed is six (6) months with **NO** option for renewal.

PLEASE BE SPECIFIC AND THOROUGH.

(PRINT) NAME

SIGNATURE

GENERAL INFORMATION SHEET

(PLEASE PRINT)

PERMIT NO.: _____

JOB ADDRESS:

Number: _____

Street: _____

City: _____

Zip Code: _____

CONTRACTOR NAME: _____

Address: _____

Street: _____

City: _____

State: _____

Phone: _____

OWNER'S NAME: _____

Address: _____

Street: _____

City: _____

State: _____

Phone: _____

(Form BDI-2)