

**CITY OF CONWAY, ARKANSAS**

Department of Permit, Inspections & Code Enforcement  
1201 Oak Street Conway, Arkansas 72032  
Phone 501-450-6107 Fax 501-450-6144



**Application for Temporary Certificate of Occupancy**

**Date of Application:** \_\_\_\_\_  
**Property Address:** \_\_\_\_\_  
**Building Permit Number:** \_\_\_\_\_

**Owner Name: (print)** \_\_\_\_\_  
**Owner Address:** \_\_\_\_\_  
**Owner Phone Number:** \_\_\_\_\_

**General Contractor Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**General Contr. Phone Number:** \_\_\_\_\_

I UNDERSTAND that the items pending completion will be listed on the Temporary Certificate of Occupancy and such items shall be properly completed prior to issuance of the final Certificate of Occupancy.

I UNDERSTAND that a Temporary Certificate of Occupancy is issued for a maximum of thirty (30) days and the issuance of a Temporary Certificate of Occupancy allows for the legal occupancy of the building only for the time frame specified on said certificate.

I UNDERSTAND AND AGREE to vacate the building upon the expiration dated noted on the Temporary CO, unless an additional Temporary CO is obtained prior to such expiration date.

I UNDERSTAND that failure to vacate the building or obtain an additional Temporary CO shall constitute a misdemeanor offence and shall be subject to penalties as prescribed by law.

I UNDERSTAND AND AGREE that failure to comply with the above stated conditions shall serve as authorization to allow the City of Conway to remove the utility services to the building until such time as the building is found to be in full compliance with all City codes, ordinances and conditions of approval

I UNDERSTAND AND AGREE that the tenants of the building have been, or will be, notified of the limitations of occupancy prescribed by the conditions as stated on this application and the defense of any legal actions initiated by the tenants as a result of loss of utilities or vacation of the premises as a result of failure to abide by the conditions of this agreement shall be the responsibility of the parties listed above and the City of Conway shall be held harmless in any such suit.

UNDER PENALTY OF INTENTIONAL MISREPRESENTATION AND/OR PERJURY, I declare that I have examined and made this application and the information provided herein is true and correct to the best of my knowledge and belief. I realize the information I have affirmed hereon forms a basis for the issuance of the Temporary Certificate of Occupancy herein applied for.

**Owner's Signature:** \_\_\_\_\_  
**General Contractor's Signature:** \_\_\_\_\_

*(This application requires the signatures of the owner and the licensed general contractor to acknowledge and agree to the limitations and conditions applicable to the Temporary Certificate of Occupancy.)*

<i>TCO Fees:</i>	
<i>Commercial Buildings</i>	<i>\$500.00 for each TCO</i>
<i>One and Two Family Dwellings -</i>	<i>\$25.00 for the 1<sup>st</sup> TCO and \$250.00 for each TCO thereafter.</i>