



CONSTRUCTION CODES
2650 LaFranier Rd
Traverse City, MI 49686
231-995-6044
codes@gtcountymi.gov

Temporary Occupancy Form

I, _____, wish to request temporary occupancy
for the permit _____ for the address of _____
_____.

The following items still need to be completed:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____

I am requesting a period of _____. (Up to 180 days)

Printed Name

Signature

Prior to expiration date, a call for re-inspection is required. **A PERMANENT CERTIFICATE OF OCCUPANCY IS REQUIRED FOR ALL COMPLETED PROJECTS.**