

RESIDENTIAL OCCUPANCY REQUEST FORM

CITY OF NOVI

COMMUNITY DEVELOPMENT DEPARTMENT

(248) 347-0415 FAX: (248) 735-5600

To schedule inspections please visit www.cityofnovi.org

Please do not submit this form until all approvals for this project are received.

2 working days notice are required for processing (does not start until all approvals are received)

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Builder's Name:		Email:		
Cell Phone Number:		Permit N	Permit Number:	
Job Address:				
Subdivision:			Lot No.	
	PERMIT NUMBERS ARE REQU	IRED FOR	TCO OR C/O PROCESSING	
□ PI	LUMBING APPROVAL (FINAL) Permit #		FINAL GRADE APPROVAL WOODLAND/WETLAND FINAL GRADE	
□ ні	EATING APPROVAL (FINAL) Permit #		APPROVAL DISCLOSURE STATEMENT	
□ FI	REPLACE FINAL Required Not Required Permit #		WATER ANALYSIS ☐ Required ☐ Not Required	
□ EI	LECTRICAL APPROVAL (FINAL) Permit #		RESIDENTIAL GAS PRESSURE TEST/ AFFIDAVIT Permit #	
□ RI	EFRIGERATION APPROVAL Required Not Required Permit #		WELL APPROVAL (OAKLAND COUNTY) Required Not Required	
□ ві	UILDING APPROVAL (FINAL) Permit #		SEPTIC APPROVAL Required Not Required	
□ w	ETLANDS APPROVAL Yes No Not Required		WOODLANDS APPROVAL Yes No Not Required	
	TREET TREE APPROVAL (Only required for ☐ Yes	r homes that a	are not in a development)	
Signature:			Date:	