

HOUSING INSPECTION DEPARTMENT  
40 SEVERANCE CIRCLE  
CLEVELAND HEIGHTS, OH 44118  
216-291-5900



## APPLICATION FOR CERTIFICATE OF OCCUPANCY/INTERIOR INSPECTION EXEMPTION

Owner \_\_\_\_\_

Owner's Address \_\_\_\_\_

City/State/Zip Code \_\_\_\_\_ Phone # \_\_\_\_\_

I CERTIFY THAT I AM NOT RENTING THE PREMISES LOCATED AT: \_\_\_\_\_  
(Please specify exact address: if side by side or if up and down)

This Dwelling unit is:  Vacant  Occupied by co-owner  Occupied by family members not paying rent

First floor address \_\_\_\_\_ # of persons living in unit \_\_\_\_\_

Or

Side One address \_\_\_\_\_ Phone # \_\_\_\_\_

Head of Household \_\_\_\_\_ Relationship to property owner \_\_\_\_\_

Other occupants (state age of minor children) \_\_\_\_\_ Relationship to head of household \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Second floor address \_\_\_\_\_ # of persons living in unit \_\_\_\_\_

Or

Side One address \_\_\_\_\_ Phone # \_\_\_\_\_

Head of Household \_\_\_\_\_ Relationship to property owner \_\_\_\_\_

Other occupants (state age of minor children) \_\_\_\_\_ Relationship to head of household \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I HEREBY DECLARE THAT THIS APPLICATION HAS BEEN EXAMINED BY ME AND IS TRUE, CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

Date \_\_\_\_\_ Signature \_\_\_\_\_

NOTE: ANY CHANGE IN OCCUPANCY OR RENTAL STATUS MUST IMMEDIATELY BE REPORTED TO THE HOUSING INSPECTION DEPARTMENT