



**Pilot Point**

— TEXAS —

POINTING THE WAY SINCE 1845

**City of Pilot Point  
Commercial Certificate of Occupancy Application Packet**



## Certificate of Occupancy Checklist & Instructions

### Checklist:

- The completed Certificate of Occupancy Application and \$100 non-refundable application fee.
- Texas Sales and Use Permit
- Copy of any State Licenses required for operation of your business (*i.e. TABC, DSHS, TDLR – if there are separate licenses per operator they must each be provided*).

### Instructions:

1. Complete the application in its entirety and submit all of the noted supporting documentation.
2. Pay the non-refundable application fee (\$100) to initiate the Certificate process.
3. There will be a series of two (2) inspections for general occupancy requests. \*There is a 3<sup>rd</sup> inspection for food sales, preparation and/or vending.
  - i. Building Inspection
  - ii. Fire Marshall Inspection
  - iii. \*Health Inspection (if applicable)
4. The building and code inspection will be scheduled upon application. Once your appointment is scheduled you will need to make sure you are available and that the space is open for access to the building and code officials.
5. Please note that the **initial inspection** by the Building Inspector indicates that the space/building is in adequate condition to begin allowing preliminary set-up of your business. This does **NOT** mean that you are approved for business operations. Please call Countywide Inspection Services on their inspection request line, (940) 521-0470.
6. After successful approval of building inspections, you may contact the Fire Marshall, Bryan Cox, at (940) 597-0327 to schedule your Fire Department Inspection.
7. At successful completion of the Fire Marshal Inspection the application will be reviewed for Final Certificate by the Development Services Department. Once issued, the Final Certificate will need to be **POSTED IN A CONSPICUOUS LOCATION** to begin full operation of your business. Call (940) 686-2165 for additional questions.
8. If you are a food establishment, food vendor, retail food store, or food processing establishment, you will also need an approved inspection by the Health Inspector. You may contact John Glover, Health Inspector, at (940) 231-0770 to schedule your Health Inspection.
9. If an inspection is denied for any reason, it will be your responsibility to contact the appropriate channels to schedule a re-inspection.
10. Tenants and Owners are required to comply with all applicable City codes. A Certificate of Occupancy **will not** be issued until **ALL** requirements have been met and all supporting licensing/permitting documentation is received.
11. For questions regarding Building Codes, contact the Development Services Department at (940) 686-2165 or the Building Official, Michael Dougherty, at (940) 284-5677, or the Fire Marshal, Bryan Cox, at (940) 597-0327.

Development Services Departments  
102 E. Main Street, Pilot Point, Texas 76258  
[permits@cityofpilotpoint.org](mailto:permits@cityofpilotpoint.org) | (940) 686-2165



### Knox Box Order Instructions:

1. Type in your web browser [www.knox-box.com](http://www.knox-box.com)
2. Click the Buy Now button at the top of the page.
3. Enter Pilot Point in the box asking for Fire Dept. name and hit search.
4. You should see Pilot Point Fire Dept. come up / then click on the logo.
5. Click the green tab that says “Proceed with Pre-Authorization Order.”
6. Select the style and color that works for your facility.
  - a. **Note:** You only need one with a “tamper switch” if plan on wiring it into the alarm system.
7. Once you select your style it will ask you for the installation location (what address it will be installed at).
8. Once you fill this out, Knox Box will notify the City of Pilot Point Fire Departments of your intended purchase and location for Fire Department approval.
9. Once the Fire Department approves this request, Knox Box will contact you to finalize the purchase and shipping instructions.
10. Once you have received the Knox box, please contact the Fire Department to discuss appropriate locations on the building for mounting the box.





## Certificate of Occupancy Common Code Violations Checklist

### Exterior Features

- All fire lanes striped per City of Pilot Point standards and access roads are clear and unobstructed.
- Fire hydrants shall be completed and in working order.
- Accumulation of waste material.
- Address on front and rear exits shall be legible from the street and fire lane.
- Address listing on electric and gas meters and/or disconnecting means.
- Knox Box located at the main entrance and/or riser room.

### General

- Storage clearance: un-sprinklered –24 inches to ceiling; sprinklered – 18 inches to sprinkler heads.
- Sprinkler heads clear of paint/debris.
- Ceiling panels in place.
- Clearance in front of electrical panel a minimum of 36 inches.
- Empty slots in electrical panels filled.
- Occupancy load posted.
- Fire rated assemblies constructed and penetrations sealed.
- Extension Cord / multi-adapter utilized per code.
- Abatement of electrical hazards.
- Mechanical/electrical/boiler rooms free from storage and combustibles.
- Flammables/combustible liquids stored in proper location and container.
- General housekeeping and precautions against fire.
- Slots in electrical panels must be filled by blanks and all electrical receptacles have cover plates
- Wall and ceiling finishes shall be in accordance with the 2015 International Fire Code, Table 806.3, for all corridors, rooms and enclosed spaces. Field tests on interior finishes may be required.
- Tenant separation wall/demising walls shall be a minimum of 1-hr fire rated construction.
- All fire rated assemblies and fire doors are intact.

### Exits

- Accessible means of egress.
- Exits unlocked.
- Exits are not blocked
- Exit lights operational



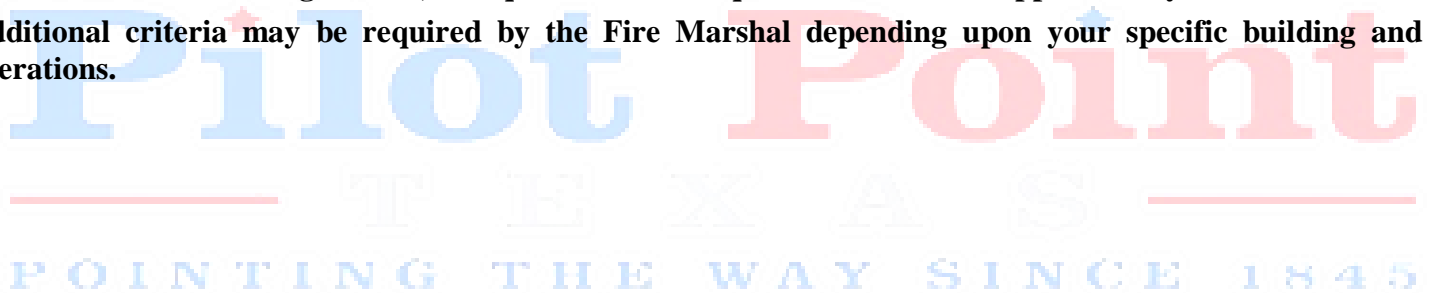
- Emergency lighting operational
- All exit doors located in the means of egress that are capable of locking or latching shall be operable from the inside without the use of a key, tool or any special knowledge or effort, or provided with approved panic hardware.

## Fire Protection Equipment

- Portable fire extinguisher serviced within 1 year or manufactured in current calendar year
- Minimum 2A-20BC fire extinguishers per 3000 sq. ft, with a maximum travel distance of 75 ft. from any point within the building.
- Sprinkler system “Green Tagged”, in-service and deemed operational.
- Alarm system “Green Tagged”, in-service and deemed operational.
- Kitchen hood/ spray booth system “Green Tagged”, in-service and deemed operational.
- Other fire protection systems “Green Tagged”, in-service and deemed operational.
- All devices installed according to plans.
- Fire protection equipment room(s), riser room, labeled and access provided.
- Access control system/gates in-service, inspected and deemed operational.
- Arrangement of interior walls and/or drop ceiling may not interfere with the operation of the fire sprinkler system.
- Fire doors unblocked and operational.
- Provide spare sprinklers and wedges in cabinet
- Any type of special protection system required? (i.e. ventilation, smoke dampers, smoke control, kitchen hood, storage tank)

**\*\*All buildings over 6,000 square feet are required to have fire suppression systems.**

**Additional criteria may be required by the Fire Marshal depending upon your specific building and operations.**





## Certificate of Occupancy Application

### Site Information

Property Address:	Suite #	Name of Business:		
Property Owner:		Office #:		Cell #
Address:	City/State:	Zip:	Email:	

Reason for CO:	Business Use:	Sq. Feet	# of Employees	Sprinkler System	
<input type="checkbox"/> New Building	<input type="checkbox"/> Retail			<input type="checkbox"/> Yes	
<input type="checkbox"/> Alteration/Remodel	<input type="checkbox"/> Restaurant			<input type="checkbox"/> Office	<input type="checkbox"/> No
<input type="checkbox"/> New Business in Existing Space	<input type="checkbox"/> Service			<input type="checkbox"/> Industrial	
<input type="checkbox"/> Change of Ownership	<input type="checkbox"/> Wholesale			<input type="checkbox"/> Auto	
<input type="checkbox"/> Change of Name	<input type="checkbox"/> Other: _____				

### Business Information:

Company Name:		DBA:
Contact Name:		Contact Email:
Mailing Address:		Office #:
City/State:	Zip:	Fax #:

<input type="checkbox"/> Yes	<input type="checkbox"/> No	1. Will flammable or combustible liquids be stored, used, mixed or dispensed at this location, other than for maintenance or for operation of equipment? If so, attach description and quantities and attach MSDS sheets.
<input type="checkbox"/> Yes	<input type="checkbox"/> No	2. Will hazardous or toxic chemicals such as, but not limited to, oxidizers, corrosive liquids, poisonous gases, radioactive, explosive, and organic materials be handled? If so, attach description and quantities and provide MSDS sheets.
<input type="checkbox"/> Yes	<input type="checkbox"/> No	3. Will any of the following industrial processes be performed on the premises? Manufacturing /Treating /Formulation/Mixing/Processing Vehicle Washing
<input type="checkbox"/> Yes	<input type="checkbox"/> No	4. Will any liquid wastes or sludge be generated which are not disposed of in the sewer system?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	5. Will there be any spray painting on the premises?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	6. Will food or beverages be manufactured, stored, distributed, or sold in any manner other than in vending machines?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	7. Will any form of waste water pre-treatment be utilized at this location?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	8. Will any goods, merchandise or raw materials be stored or displayed outdoors?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	9. Will alcoholic beverages be sold?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	10. Will any sign(s) be erected or changed?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	11. Will the facility be remodeled, renovated, or altered?

I CERTIFY THE ABOVE INFORMATION TO BE TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE. FALSIFIED INFORMATION MAY RESULT IN THE REVOCATION OF THIS CERTIFICATE OF OCCUPANCY AND THE ISSUANCE OF MUNICIPAL CITATIONS. (INCOMPLETE APPLICATION MAY NOT BE ACCEPTED).

Responsible Party/Tenant Name:	Signature:
_____	_____
(Must be completed by Tenant/Business)	

Contact Phone:	Driver's License #/State:	Date:
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