



Village Of Lawrence
 157 N. Paw Paw
 Lawrence Michigan 49064
 (269) 674-8161 • Fax (269) 674-3004
 www.lawrencemi.org



Certificate Of Occupancy

Permit # _____ Permit Fee _____ Date _____

Location Address _____ Apartment # _____

Owner Name _____ Phone # _____

Applicant for Permit _____ Phone # _____

<u>Type of Occupancy</u>				
New _____	Sale _____	Rental _____	Addition _____	Repair _____

Occupancy Inspection Requirements for the Village of Lawrence

SMOKE ALARMS THROUGHOUT THE HOME/BUSINESS:

- ___ Pass ___ Fail: One in or near the kitchen
- ___ Pass ___ Fail: One in basement
- ___ Pass ___ Fail: One in garage (if attached)
- ___ Pass ___ Fail: One in each hallway
- ___ Pass ___ Fail: One in each bedroom (recommended)
- ___ Pass ___ Fail: One in living room
- ___ Pass ___ Fail: One in the hallway going upstairs

FIRE EXTINGUISHERS: (ABC all purpose & up to date on charge)

- ___ Pass ___ Fail: One in the kitchen but not near the stove

HAND RAILS:

- ___ Pass ___ Fail: One going upstairs
- ___ Pass ___ Fail: One going into the basement

DROP PIPE ON HOT WATER HEATER:

- ___ Pass ___ Fail: The hot water heater has a safety relief valve either on the top or the side of unit. This pipe must extend to within 6 inches of the floor. In a mobile home it should extend through the floor under the trailer.



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ELECTRICAL:

- Pass Fail: All outlets on the walls must have a cover
- Pass Fail: Electric service panel must have a cover
- Pass Fail: Any wire connections boxes must have a cover
- Pass Fail: No wires are to be exposed or hanging loose out of the ceiling lights or wall outlets
- Pass Fail: Outlets in the kitchen or bathrooms near water must have ground fault receptacle's if home is wired with two wires plus a ground.

PLUMBING:

- Pass Fail: Stools, sinks, drains. Must all work

BUILDING DEFICIENCIES:

- Pass Fail: No broken windows, holes in the floors, walls or doors
- Pass Fail: Siding must cover home
- Pass Fail: Carpets should not have holes or tears

Occupancy Denied _____ Occupancy Approved _____

Inspected By _____