**PROJECT APPROVAL AUTHORIZATION**

**PARTIAL UTILIZATION: (BENEFICIAL OCCUPANCY)**

Project:

SCO Identification Number: \_\_\_ Contract Completion Date: \_\_\_\_\_\_\_\_

Project Owning Agency:

Owning Agency’s Requester: Date:

Designer’s Statement:

(Designer of Project) provides information to the owner and the State Construction Office that the project has been evaluated and field inspected to assure that construction meets contract requirements for partial utilization and/or occupancy by the owning agency.

Designer’s Representative Signature

Project Description:

Project Partial Utilization Description:

**BACK-UP DATA:**

**CONTRACTOR’S APPROVAL DOCUMENTS:**

General Construction Contractor’s Approval: Date \_\_\_\_\_\_\_ N/A

Electrical Construction Contractor’s Approval: Date \_\_\_\_\_\_\_ N/A

Mechanical Construction Contractor’s Approval: Date \_\_\_\_\_\_\_ N/A

Plumbing Construction Contractor’s Approval: Date \_\_\_\_\_\_\_ N/A

Sprinkler Installation Contractor’s Approval: Date \_\_\_\_\_\_\_ N/A

Asbestos Removal Contractor’s Approval: Date \_\_\_\_\_\_\_ N/A

Other: Date \_\_\_\_\_\_\_ N/A

Other: Date \_\_\_\_\_\_\_ N/A

Other: Date \_\_\_\_\_\_\_ N/A

Certificate of Occupancy by Local Authority Having

Jurisdiction (Community College): Date \_\_\_\_\_\_\_ N/A

Beneficial Occupancy Inspection: Date \_\_\_\_\_\_\_ N/A

Beneficial Occupancy Punch List to be completed: Date \_\_\_\_\_\_\_ N/A

Owner’s Assumption of Responsibility for Maintenance,

Heat, Utilities, and Insurance.

Comments:

Date \_\_\_\_\_\_\_ N/A

Established Date for Guarantees and Warranties.

Comments:

Date \_\_\_\_\_\_\_ N/A

Consent of Surety: Date \_\_\_\_\_\_\_ N/A

Insurance Company Permitting Occupancy: Date \_\_\_\_\_\_\_ N/A

SCO Electrical Inspection (Certificate of

Electrical Completion): Date \_\_\_\_\_\_\_ N/A

Installer’s Fire Alarm System Record of

Completion (Certification) as required by

NFPA 72: Date \_\_\_\_\_\_\_ N/A

Installer’s Sprinkler System Material and Test Reports

as required by:

NFPA 13-(Sprinkler Systems) Date \_\_\_\_\_\_\_ N/A

NFPA 14-(Standpipe and Hose Systems) Date \_\_\_\_\_\_\_ N/A

NFPA 20-(Centrifugal Fire Pumps) Date \_\_\_\_\_\_\_ N/A

NFPA 22-(Water Tanks for Private Fire Protection) Date \_\_\_\_\_\_\_ N/A

NFPA 24-(Private Fire Service Mains) Date \_\_\_\_\_\_\_ N/A

Other: SCO Approval Letter Sprinkler System Date \_\_\_\_\_\_\_ N/A

Engineer’s Approval of Battery Powered Emerg. Devices Date \_\_\_\_\_\_\_ N/A

Engineer’s Approval Emergency Generator Load Test Date \_\_\_\_\_\_\_ N/A

Engineer’s Approval Electrical Serv Ground Test Report Date \_\_\_\_\_\_\_ N/A

Dept. of Labor Approval for Elevator: Date \_\_\_\_\_\_\_ N/A

Dept. of Labor Approval for Boiler & Pressure Vessels: Date \_\_\_\_\_\_\_ N/A

Dept. of Agriculture Approval for Fuel Tanks: Date \_\_\_\_\_\_\_ N/A

Health Dept. Inspection and Acceptance for Use: Date \_\_\_\_\_\_\_ N/A

Domestic Water Test Report and Acceptance for Use: Date \_\_\_\_\_\_\_ N/A

Laboratory Hood Certification: Date \_\_\_\_\_\_\_ N/A

Engineer’s Approval of Test and Balance Report (TAB) Date \_\_\_\_\_\_\_ N/A

Engr’s. Verification Letter Fire Damper Operation Date \_\_\_\_\_\_\_ N/A

Agreement & Means for Separation of Owner Occupied

Area from Construction Work Area: Date \_\_\_\_\_\_\_ N/A

Designer’s Inspection to Assure Life Safety

Construction involving Fire Protection Systems

(Fire Alarm, Sprinkler, etc.), egress, fire

rated walls and egress travel distances

are constructed in accordance with contract

documents: Date \_\_\_\_\_\_\_ N/A

Backflow Preventer Certification Date \_\_\_\_\_\_\_ N/A

Engineer’s Approval Stair/Ramp Survey Date \_\_\_\_\_\_\_ N/A

Engineer’s Approval Site Survey (DENR) Date \_\_\_\_\_\_\_ N/A

Metal Building Manufacturer’s Warranty Date \_\_\_\_\_\_\_ N/A

Roofing Manufacturer’s Warranty Date \_\_\_\_\_\_\_ N/A

Commissioning Engineer’s Approval Date \_\_\_\_\_\_\_ N/A

Lightning Protection UL Master Label Date \_\_\_\_\_\_\_ N/A

Special Inspector’s Final Report/Resolutions Date \_\_\_\_\_\_\_ N/A

Designer’s Approval: Date: \_\_\_\_\_\_\_ Signature:

Owning Agency Approval: Date: \_\_\_\_\_\_\_ Signature:

SCO Approval: Date: \_\_\_\_\_\_\_ Signature:

Rev.(4/23/10)