

## Certificate of Occupancy

Project Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Location: \_\_\_\_\_ BP# \_\_\_\_\_ Project#: \_\_\_\_\_  
Contractor: \_\_\_\_\_ Contact Info: \_\_\_\_\_  
UTSA PM: \_\_\_\_\_  
Scope/ Description: \_\_\_\_\_  
\_\_\_\_\_

YES NO N/A

- Has all re-worked and/or added plumbing been tested, inspected and approved?
- Has all re-worked and/or added ductwork been tested, inspected and approved?
- Has all re-worked and/or added HVAC equipment been tested, inspected and approved?
- Has all re-worked and/or added refrigerant lines been tested, inspected and approved?
- Has all re-worked and/or added electrical been tested, inspected and approved?
- Are fire rated assemblies fire-stopped and labeled with rating?
- Barrier free accessibility? Attach RAS report if required
- Record of inspection/approval by COSA Metropolitan Health Department attached?
- Back-flow assemblies certified/approved? Copy of TCEQ 20700 T&M Form attached?
- Exit signage, lighting, panic hardware where required,

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

Director of Inspections and Plan Review  
[ipr@utsa.edu](mailto:ipr@utsa.edu)

YES NO N/A

- Has fire alarm system been tested, inspected, and approved?
- Has fire sprinkler system been tested, inspected, and approved?
- Has commercial kitchen hood been permitted, tested, inspected, and approved?

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

Fire Marshal  
[Fire.EnvironmentalHealthSafety@utsa.edu](mailto:Fire.EnvironmentalHealthSafety@utsa.edu)