



Pittsfield Charter Township
Department of Building Services

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Kurt Weiland
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Laura Igna
Building Services Manager
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Mandy Grewal, Supervisor

Certificate of Occupancy Request

Property Information

(Please Print)

_____ Parcel I.D. # 12 - _____ - _____ - _____
Street Number Street Name

Permit Information

Building Permit # _____ Type of C of O: Final Temporary

Structure to be used as: Residential Commercial Industrial Other: _____

Bond Items (Temporary C of O):

Applicant Information (Contractor/Property Owner)

(Please Print)

_____ (_____) _____
Applicant Name Company Name Contact Number Email Address

_____ City State Zip
Address

_____ Date
Applicant Signature

:: Performance Deposit Refund Request ::

I hereby request that the Performance Deposit (Bond) in the amount of \$ _____, which was posted on _____, be refunded. I certify that all uncompleted items covered by the deposit have been completed and approved by the Township.

_____ Date
Signature