



BOARD OF RULES AND APPEALS

Instructions for Submitting an Appeal

EXTENSION OF TEMPORARY CERTIFICATE OF OCCUPANCY (TCO)

FOR PERMITS ISSUED UNDER THE SOUTH FLORIDA BUILDING CODE ONLY:

SFBC Section 307.5 Temporary and/or Partial Certificate of Occupancy

SFBC 307.5(b) The Temporary and/or Partial Certificate shall be issued for a limited period not to exceed ninety days, but may be extended for an additional ninety days at the discretion of the Building Official, if, in his opinion, such extension is justified. **No further extensions shall be granted without the approval of the Board of Rules and Appeals.**

The following items **must** be included in your appeal packet in order to be placed on the agenda.

Letter to Secretary of the Board, Board of Rules and Appeals, **11805 SW 26th Street, Room 230, Miami, Florida 33175** to include an explanation of why an extension is required. This letter must be from the owner or co-signed by the owner.

Letter must include your name, address, phone number and fax number, along with the following:

A completed Miami-Dade County Department of Regulatory and Economic Resources – Building Department Temporary Certificate of Completion **BORA Form -04** signed by the Building Official with his recommendation.

To ensure placement of this issue on the agenda of the next Board of Rules and Appeals, this form must be returned to the Department of Regulatory and Economic Resources no later than two weeks prior to the next Board of Rules and Appeals meeting.

Please contact the **Board Administration Section** at **(786) 315-2573** to find out the date of the next meeting of the Board of Rules and Appeals.



Miami-Dade County
Department of Regulatory and Economic Resources
 11805 SW 26th Street
 Miami, Fla. 33175
 Tel. (786) 315- 2573 Fax (786) 315- 2570

BUILDING DEPARTMENT
TEMPORARY CERTIFICATE OF OCCUPANCY
T.C.O. INFORMATION

Date: _____

The following Owner/Tenant / *Contractor has applied to the Board of Rules and Appeals for a extension of the Temporary Certificate of Occupancy (TCO).

Applicant, check appropriate:	Owner	Tenant	*Contractor
Applicants Name	_____		
Job site Address	_____		
Contractor	_____		
Contractor Address	_____		
Permit #	_____		
Permit Application Date	_____		
Group of Occupancy	_____		
Date of expiration of the current TCO	_____		

Building Official recommendation:

All Code provisions relating to sanitary and means of egress facilities, including those serving the physically handicapped, fire-resistive separations, structural adequacy, the barricading of work areas, and public safety have been met, and only minor details are not completed.

Yes, I recommend extension of the TCO for a period of _____ days.

No, I do not recommend the extension of the TCO for the following reason: _____

Signature of the Building Official _____

Municipality _____

*** If the Contractor applies, the Contractor must submit a letter signed by the owner, supporting the request for TCO.**