

Town of Preston
Certificate of Occupancy

Date: _____

Address: _____

Parcel Number: _____ Zoning Type: _____ Bldg. Permit Number: _____

Owner/s Name: _____

Address: _____

Town: _____ State: _____ Zip: _____

Phone: _____ Cell: _____

Intended Use of Property:

Upon the issuance of the Certificate of Occupancy, the occupant/owner may occupy the structure/property.

Signature of Issuant: _____

Title: _____

Date: _____