


## Cobb County Fire Marshal's Office (CCFMO) – Information Change Form

 <p><b>Fire Marshal's Office</b></p> <p><b>Plan Review</b></p>	<p><b>Application to Occupy a Building/Space that has a Valid Previously Issued Certificate of Occupancy; Cities of Acworth, Kennesaw, Powder Springs and Unincorporated Cobb County</b></p> <p>New Business Name: _____</p> <p>Address: _____ Suite # _____</p> <p>City: _____ Zip Code _____</p> <p>Owner's Name: _____ Phone # _____</p> <p>Email: _____</p> <p><b>Notice:</b> This application is for a Name Change, Sublease, or Re-Issuance of occupancy for Assembly, Storage or Industrial occupancies. Assembly, storage and industrial occupancies cannot use a Name Change. Complete the application and provide the following items below so your documents and tenant floor plans can be reviewed.  <b>Email completed form to <a href="mailto:fmoinspections@cobbcountry.org">fmoinspections@cobbcountry.org</a></b></p>
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DOCUMENTS REQUIRED FOR TO REVIEW APPLICATION	✓ = Pass, X = Fail	Status
1) Provide a current floor plan as presently configured/arranged ( <i>floor plan commonly found with lease documents</i> )		
2) Provide pictures of all areas throughout your tenant space for visual verification		
3) Provide a copy of the existing Certificate of Occupancy (CO) from the previous tenant/occupant		
4) Provide a Scope of Operations letter that is notarized: describing the businesses day-to-day operation		
5) A Commodity Protection Assessment packet may be required at the discretion of the reviewer		

*(This process does not apply to CO's issued prior to 1982 in accordance with O.C.G.A. 25 – 2 – 12 – C - 4)*

**Acknowledgement Affidavit:**

I \_\_\_\_\_ am notifying CCFMO that the, business, and/or owners' is changing at  
 (Print Owner Name)  
 the above listed location. I have made no changes in any way (i.e., any gas lines, mechanical, plumbing and/or electrical work, moving of load bearing, non-load bearing walls, or exits, etc.) to the address listed above. I also affirm that I will be conducting the same type of business that was previously approved by your office. I understand that if I wish to make any changes that influence the occupancy type, I must first submit plans to CCFMO and obtain a permit through the appropriate Building Department. \_\_\_\_ (initial)

I understand that a Certificate of Occupancy **will not** be issued in my new business name, if my business is located within the City limits of Acworth or unincorporated Cobb County. \_\_\_\_ (initial)

I understand that a Certificate of Occupancy **will be** issued in my new business name, if my business is located in the City Limits of Kennesaw or Powder Springs. I understand I must contact the Kennesaw or Powder Springs Building Department to submit the required documentation to obtain my Certificate of Occupancy. City of Kennesaw's approval to use this form is on a case-by-case basis. \_\_\_\_ (initial)

I also understand that I must schedule a fire inspection of my business prior to the completion of this process. The inspector may discover violations that will need to be corrected in a timely manner. I also understand that the inspector may find violations that will require plans to be submitted and a permit obtained to correct the violations. \_\_\_\_ (initial)

I \_\_\_\_\_ attest, to the best of my knowledge, all the information that I have provided is true.  
 (Owners Signature)

**Public Notary Section**

Name \_\_\_\_\_ Signature: \_\_\_\_\_ Notary Stamp:

Date of witness: \_\_\_\_\_ Expiration: \_\_\_\_\_

**For Official CCFMO Use Only**

*(Initial box once completed)*

1. Enter the applicant into Mobile Eyes and create a Job		
2. Check with the Building Department prior to approving this process		
3. Type of Plan review required:		
4. Other/Notes:		
5. Inform status and required action to the tenant		
6. Application: Pass _____ Fail _____		
Occupancy Classification:		Occupant Load:
Reviewer:	Date:	OCC ID:
Inspector: _____ Date: _____ Pass _____ Fail _____		