



City of Sunnyvale

Business Occupancy Resumption Program

PROGRAM RENEWAL

[To be submitted every three years before each anniversary of original approval date.]

Building Address: _____, Sunnyvale, California.

Estimated current building valuation is \$ _____

No change has been made in the building or any element of emergency inspection program.

All emergency equipment and supplies for the program have been checked and updated as necessary.

The building owner has changed. The new owner is: _____
A Request for Precertification form signed by the new owner is enclosed.

Emergency inspectors/contact information has changed. Completed Emergency Inspector Authorization forms for *new* inspectors are enclosed.

Changes have been made to the building that affect the Emergency Inspection Program. Emergency inspectors have been given revised drawings for any relevant changes to the building.

Emergency inspectors have been given a copy of all Emergency Inspection Program revisions.

Signed by:

The designated contact person for update (the structural inspector, or the owner, or the owner's agent):

(signature) _____

(printed name) _____

Date: _____

Company: _____ Phone No.: _____ Email: _____

The updated documentation for this building has been accepted by the Building Division. The building will remain on the list of buildings for the Building Occupancy Resumption Program.

Accepted by:

Date: _____

RETURN ONE COPY OF THIS FORM TO BUILDING OWNER AFTER REVIEW & ACCEPTANCE