

BUILDING CODE

MAIN OFFICE (302) 855-7860
MAIN OFFICE (FAX) (302) 855-7821

INSPECTION SCHEDULING (302) 858-5500
INSPECTIONS (FAX) (302) 855-7821

PLAN REVIEW (302) 855-7860
PLAN REVIEW (FAX) (302) 855-7869



Sussex County

DELAWARE
sussexcountyde.gov

ANDY WRIGHT
CHIEF OF BUILDING CODE

WINTER/BAD WEATHER SETTLEMENT LETTER

NOTE: This form MUST be submitted to the Sussex County Building Code Department PRIOR to the final inspection. Failure to submit this form when the final inspection is requested may result in a delay in the issuance of the Certificate of Occupancy.

Sussex County Building Code Department
PO Box 589
Georgetown, DE 19947

RE: CERTIFICATE OF OCCUPANCY FOR

TAX DISTRICT-MAP-PARCEL #
PERMIT #
UNIT(S) #

The purpose of this letter is to request that the Sussex County Building Code Department issue a Certificate of Occupancy (C of O) for the above referenced property, which, because of conditions beyond our control, the finished grade will not be complete prior to the final building inspection.

The Builder will not have the finished grading completed prior to the final building inspection. The Buyer/Owner desires the issuance of the Certificate of Occupancy with full knowledge that positive drainage has not been provided. It is understood by all signatories that the Builder has unconditionally guaranteed that the proper final grading will be completed as soon as circumstances will allow, maximum sixty (60) days. The scheduling of this "final grading" is not the responsibility of Sussex County and will not be re-inspected. The Buyer/Owner will have final grading done within sixty (60) days.



BUYER SECTION:

Buyer/Owner (Printed Name) _____ Buyer/Owner (Signature) _____ Date _____

Buyer/Owner (Printed Name) _____ Buyer/Owner (Signature) _____ Date _____

BUILDER SECTION:

Builder (Printed Name) _____ Builder (Signature) _____ Date _____

NOTARY SECTION:

By my signature below, I attest that this form was signed in my presence and attest to the authenticity of signature(s).

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

Notary (Printed Name) _____ Notary (Signature) _____ Date _____

My commission expires _____ (Notary Seal)

For Office Use Only

REQUEST: _____ GRANTED _____ DENIED

DATE: _____

Sussex County Building Code Official or Designee