

**CITY OF OCOEE  
MINIMUM STANDARDS CODE INSPECTION REQUEST**

ADDRESS TO BE INSPECTED: \_\_\_\_\_

NUMBER OF OCCUPANTS: \_\_\_\_\_

**(IF YOU ARE RENTING, YOU MUST PROVIDE THE OWNERS NAME & ADDRESS)**

**ALL LISTED OWNERS**

**RENTER'S**

NAME: \_\_\_\_\_ NAME: \_\_\_\_\_  
\_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

CITY/ST: \_\_\_\_\_ CITY/ST: \_\_\_\_\_

PHONE: \_\_\_\_\_ PHONE: \_\_\_\_\_

I, \_\_\_\_\_, AM IN LEGAL POSSESSION OF THE PROPERTY LOCATED AT \_\_\_\_\_, OCOEE, FLORIDA, AND I AM REQUESTING THE BUILDING AND ZONING DIRECTOR, OR SUCH OTHER PERSON OR PERSONS DESIGNATED BY SAID DIRECTOR OR THE CITY COMMISSION, TO INSPECT THE AFOREMENTIONED PROPERTY FOR COMPLIANCE WITH THE CODES OF THE CITY OF OCOEE; INCLUDING, BUT NOT LIMITED TO, THE "MINIMUM STANDARDS CODES", AS IT APPLIES TO STRUCTURAL STABILITY, SANITATION, VENTILATION, SAFETY, ELECTRICAL, NUISANCES AND OTHER HAZARDS. I UNDERSTAND THIS INSPECTION DOES NOT INCLUDE THE INSPECTION OF SITE IMPROVEMENTS NOR DOES THIS INSPECTION FULFILL THE REQUIREMENTS FOR THE OCCUPATIONAL LICENSE (ORD 90-17). ADDITIONAL REPAIRS AND IMPROVEMENTS MAY BE REQUIRED.

BY: \_\_\_\_\_  
SIGNATURE DATE

State of Florida, County of Orange

Subscribed before me this \_\_\_\_ day of \_\_\_\_\_, 200\_\_,  
by \_\_\_\_\_,  
[ ] personally known to me, or [ ] produced  
\_\_\_\_\_,  
as identification and did not take an oath.

By: \_\_\_\_\_  
NOTARY PUBLIC (SEAL)

**INSPECTION DATE \_\_\_\_\_ TIME \_\_\_\_\_ A.M./P.M.**

Water Released by: \_\_\_\_\_ Date: \_\_\_\_\_

