



**City of Laguna Niguel  
Building Division**  
30111 Crown Valley Pkwy  
Laguna Niguel, CA 92677  
(949) 362-4360  
[www.CityofLagunaNiguel.org](http://www.CityofLagunaNiguel.org)

## **CERTIFICATE OF USE and OCCUPANCY**

# **106**

**A certificate of Use and Occupancy is required\* for all businesses located within the City of Laguna Niguel.**

**To obtain a Certificate of Use and Occupancy from the City, the following items are required:**

- 1. Two copies of a site plan showing the location of the building on the site and location of the proposed space or suite within the existing building. Provide the name of each tenant adjoining the new lease space.
- 2. Provide two copies of the existing floor plan, including dimensions, on 18"x24" sheets. All walls, counters, furniture layout needs to be shown and the use of all rooms indicated.
- 3. Provide a letter describing the nature of your business, number of employees, hours of operation, total square footage of lease space including calculation of square footage by use, or a breakdown of office/warehouse, retail/storage, etc. if applicable. Please indicate if fire sprinklers are present.
- 4. Submit per the OCFA Plan Review Submittal Criteria.
- 5. Pay applicable fee.

Once the building permit is issued, an inspection is required by both the Fire and Building Departments. The tenant is responsible for scheduling these inspections. The Building Inspector must verify proof of Fire Department final at the time of inspection. Upon approval by both departments a Certificate of Use and Occupancy will be prepared and mailed to the new business address.

*\*2025 California Building Code Section 111.1 Use and Occupancy: No building or structure shall be used or occupied, and no change in the existing occupancy classification of a building or structure or portion thereof shall be made, until the building official has issued a certificate of occupancy therefore as provided herein.*



**City of Laguna Niguel  
Building Division**  
30111 Crown Valley Pkwy  
Laguna Niguel, CA 92677  
(949) 362-4360 FAX 362-4369  
www.CityofLagunaNiguel.org

# **CERTIFICATE OF USE AND OCCUPANCY APPLICATION**

## **General Information**

Name of Business:

Business Address (including Suite #, if applicable): City: State: Zip Code:

Business Phone #: Business Fax #:

Email Address:

Mailing Address (if different from above): City: State: Zip Code:

Check-mark applicable:  New Business  Ownership Change  Address Change  Business Name Change

## **Ownership Information**

Type of ownership:  Sole Proprietor  Partnership  Corporation

State Sales Tax #: Federal Tax ID #:

Owner or Principal: Title: Telephone #:

Home Address: City: State: Zip Code:

Partner's Name or Secondary Principal (if applicable) Title: Telephone #:

Home Address: City: State: Zip Code:

Name of Alternative Contact In Case of Emergency: Title: Telephone #:

## **Business Operation**

Type of business (circle one):  Retail  General Office  Medical Office  Restaurant  General Service  
 Warehouse  Automotive Use  Other

### **Detailed description of business operation:**

Building/Suite Size (square feet): Hours of operation: # of Employees (owners, full & part-time employees, etc.):

Construction Type: Occupancy Code: Sprinklered: Yes No

Does your business create, store, generate, or use hazardous substances or any products that are considered to be corrosive, reactive, ignitable, toxic, &/or ozone depleters? Yes  No

Proposed interior changes (i.e., structural, plumbing, electrical, mechanical alterations)? Yes  No  If marked yes, explain in detail:

Proposed exterior changes (not including signage)? Yes  No  If marked yes, explain in detail:

Proposed business identification wall sign? Yes  No  If marked yes, refer to approved sign program &/or Zoning Code standards. Requires submittal under separate application.

As the business owner or authorized agent, I hereby declare under the penalty of perjury that the statements & information on this application are true & correct.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name & Title \_\_\_\_\_

### ***For City Office Use Only (to be completed by Planning Division):***

Planning Division Reviewed & Approved By (Planner's Signature) Date

## C of O Business Use Type

(Check One)

---

<input type="checkbox"/> ADULT-ORIENTED BUSINESS	<input type="checkbox"/> MANUFACTURING AND ASSEMBLY
<input type="checkbox"/> AUTO AND MOTORCYCLE SALES (NEW)	<input type="checkbox"/> MARTIAL ARTS STUDIO
<input type="checkbox"/> AUTO AND MOTORCYCLE SALES (USED)	<input type="checkbox"/> MASSAGE
<input type="checkbox"/> AUTO PARTS SALES	<input type="checkbox"/> MEDICAL OFFICE (over 5,000 sf)
<input type="checkbox"/> AUTO REPAIR (MAJOR)	<input type="checkbox"/> MEDICAL OFFICE (under 5,000 sf)
<input type="checkbox"/> AUTO REPAIR (MINOR)	<input type="checkbox"/> MINI-STORAGE WAREHOUSE
<input type="checkbox"/> BANK	<input type="checkbox"/> MORTUARY OR FUNERAL HOME
<input type="checkbox"/> BAR/COCKTAIL LOUNGE	<input type="checkbox"/> MOTEL
<input type="checkbox"/> BARBERSHOP/HAIR SALON	<input type="checkbox"/> MOVIE THEATER
<input type="checkbox"/> BILLIARD HALL	<input type="checkbox"/> MUSEUM
<input type="checkbox"/> BOWLING ALLEY	<input type="checkbox"/> NAIL SALON
<input type="checkbox"/> CAR WASH	<input type="checkbox"/> OUTDOOR COMMERCIAL RECREATION USES
<input type="checkbox"/> CHURCH, TEMPLE OR OTHR PLACE OF ASMBLY	<input type="checkbox"/> PARKING LOT/GARAGE
<input type="checkbox"/> CLUB (DANCING/LIVE ENTERTAIN PRIMARY)	<input type="checkbox"/> PET GROOMING (w/o OVERNIGHT BOARDING)
<input type="checkbox"/> COLLEGE OR UNIVERSITY	<input type="checkbox"/> PLANT NURSERY
<input type="checkbox"/> COMMERCIAL SWIMMING POOL	<input type="checkbox"/> POLICE STATION
<input type="checkbox"/> COMMUNITY/SENIOR CENTER	<input type="checkbox"/> PRESCHOOL
<input type="checkbox"/> CONVENIENCE STORE	<input type="checkbox"/> PROFESSIONAL OFFICE
<input type="checkbox"/> DANCE STUDIO	<input type="checkbox"/> PUBLIC SCHOOL
<input type="checkbox"/> DRY CLEANERS	<input type="checkbox"/> PUBLIC UTILITY FACILITY
<input type="checkbox"/> ELEMENTARY SCHOOL	<input type="checkbox"/> RECORDING STUDIO
<input type="checkbox"/> EQUIPMENT/STORAGE YARD	<input type="checkbox"/> REPAIR SHOP
<input type="checkbox"/> FIRE STATION	<input type="checkbox"/> RESEARCH AND DEVELOPMENT
<input type="checkbox"/> GAS STATION	<input type="checkbox"/> RESTAURANT (CATEGORY I)
<input type="checkbox"/> GENERAL WAREHOUSE (NO ON-SITE SALES)	<input type="checkbox"/> RESTAURANT (CATEGORY II)
<input type="checkbox"/> GOLF COURSE	<input type="checkbox"/> RESTAURANT (FAST FOOD/DRIVE-THRU)
<input type="checkbox"/> GOVERNMENT OFFICE	<input type="checkbox"/> RESTAURANT (RETAIL FOOD)
<input type="checkbox"/> HAZARDOUS WASTE FACILITY	<input type="checkbox"/> RETAIL STORE
<input type="checkbox"/> HEALTH CLUB/GYM	<input type="checkbox"/> RV OR BOAT SALES
<input type="checkbox"/> HIGH SCHOOL	<input type="checkbox"/> TANNING SALON
<input type="checkbox"/> HOTEL	<input type="checkbox"/> TELECOMMUNICATION FACILITY
<input type="checkbox"/> INDOOR COMMERCIAL RECREATION USES	<input type="checkbox"/> TENNIS CLUB
<input type="checkbox"/> INDOOR PISTOL OR RIFLE RANGE	<input type="checkbox"/> TRUCK OR HEAVY EQUIPMENT RENTAL
<input type="checkbox"/> KENNEL/ANIMAL SHELTER (w/o OVERNIGHT)	<input type="checkbox"/> TUTORIAL SERVICES
<input type="checkbox"/> LAUNDROMAT	<input type="checkbox"/> VET CLINIC/ANIMAL HOSP (w/o OVERNIGHT)
<input type="checkbox"/> LIBRARY	<input type="checkbox"/> VIDEO GAME ARCADE
<input type="checkbox"/> LIQUOR STORE	<input type="checkbox"/> VOCATIONAL SCHOOL
<input type="checkbox"/> LUMBER YARD	<input type="checkbox"/> WHOLESALE/DISTRIBTN (NO ON-SITE)