

UPPER PROVIDENCE TOWNSHIP, DELAWARE COUNTY DEPARTMENT OF CODE ENFORCEMENT USE AND OCCUPANCY APPLICATION

Please submit application a minimum of 3 weeks prior to Settlement for sufficient processing time

Date: _____ Settlement Date: _____

Address of Property: _____

Business name if applicable: _____ Phone #: _____

Current Property Owner Name _____ Phone #: _____

Property Owner Current Address _____

Buyers Name (If Resale): _____ Phone #: _____

Buyers Current Address: _____

Lessee's Name (If Lease): _____ Phone # _____

Lessee's Current Address: _____

Please select one of the following:

Residential (\$100) _____ **Commercial (\$150)** _____

Proposed use: _____

Please circle Y (Yes) or N (No)

Detached garage Y or N

Swimming Pool Y or N

Storage sheds Y or N

Apartments Y or N

In-ground _____ Above-ground _____

of sheds _____

of apartments _____

- Has this property been granted a Variance or Special Exception by the Township Zoning Hearing Board? Y or N If yes, attach copy of Order received.
- Has this property been granted a Conditional Use by Township Council? Y or N If yes, attach a copy of approval obtained.

**AFTER SUBMITTING APPLICATION AND PAYMENT TO UPPER PROVIDENCE TOWNSHIP
CALL LINN ARCHITECTS TO SCHEDULE THE INSPECTION 610-566-7044**

**If the inspection fails, a re-inspection will be required and must be paid for prior to the re-inspection
***** Allow up to 5 business days AFTER inspection for complete processing *******

I will pick up _____ Please email to _____
I hereby certify that the statements contained herein are true to the best of my knowledge and belief.

Attach fact sheet from MLS or Similar

Applicant signature _____ Contact Phone #: _____

OFFICE USE ONLY

Application Date _____ Fee Paid _____ Check # _____ Rec'd by: _____

Inspection Date _____ PASSED _____ FAILED _____ Rec'd from: _____

Re-inspection Application Date _____ Fee Paid _____ Check # _____ Rec'd by: _____

Re-Inspection Date _____ PASSED _____ FAILED _____ Rec'd from: _____

Approved By: _____