

UPPER PROVIDENCE TOWNSHIP DEPARTMENT OF CODE ENFORCEMENT USE AND OCCUPANCY APPLICATION

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 _____ Commercial _____ Industrial _____

Proposed use: _____ (Attach fact sheet from MLS or similar)

Please circle Y (Yes) or N (No)

Detached garage Y or N

Swimming Pool Y or N In-ground _____ Above ground _____

Storage sheds Y or N # of sheds _____

Apartments Y or N # 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.

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 *******

** Certificates may be emailed or picked up in person at the Township Building. Please select below:

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

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: _____