

Instructions for Residential Occupancy Permit

* Required Fields

Tax Map Number : This number starts with 55 and is available on your property tax statement.

Zoning : To be determined by Community Development Department.

***Present Owner :** Person or persons listed on deed or mortgage as of date of filing the application.

***Address of Owner :** Address where you receive your personal mail.

***Contact Number :** Number to reach you if additional information is needed.

Fax Number or Email Address : Necessary if you wish copies or correspondence be sent to you.

***Address of subject property :** This must be a physical address not a PO Box , etc....

***Buyer or Lessee Name :** Full legal name of individual or individuals whose name will appear on the lease or deed.

***Buyer or Lessee Address :** Address where the proposed new property owner currently resides.

***Contact Number :** Number to reach buyer in case additional information is needed. In addition, a fax number or email address can be listed if copies are to be sent.

***Public Sewage or Septic :** Check appropriate area. If public sewage, contact PTSA or FTMSA at the given number to set up an inspection date. If property has an on site sewage system, (i.e. septic tank, etc...) a building official will make a physical inspection of the property.

***Current Use :** Check appropriate area with regard to property use at present time.

Proposed Move In Date : Date of closing on property

***Signature of Applicant :** Person responsible for submission of this application.

***Date :** Date application was completed and signed.

Upon Receipt of this application and applicable fees a Building Code Official will visit the subject property

No Application Will Be Processed Without the Required Fields Completed.

PENN TOWNSHIP COMMUNITY DEVELOPMENT

TELEPHONE
(724) 744-2171

2001 MUNICIPAL COURT
HARRISON CITY, PA 15636

FAX
(724) 744-7579

PENN TOWNSHIP ZONING OCCUPANCY PERMIT APPLICATION

Permit No. _____ Paid _____ Check No. _____

Tax Map No. _____ Zoning _____

Present Owner _____

Address of Owner _____

Contact Number _____

Address of Subject Property _____

Buyer or Lessee Name _____

Buyer or Lessee Address _____

Contact Number _____

Public Sewage (IF PUBLIC SEWAGE, contact the Penn Township Sewage Authority at 724-744-4333 or Franklin Township Municipal Sewage Authority 724-327-1950, depending on your provider, for an inspection)

Septic

Current Use: Residential _____ Commercial _____ (Additional Form Required)

Proposed Move in Date _____ (Application must be submitted one week prior to move in date)

Application is hereby made for permission to occupy the premises where described as above and for the current use as described as above. If such use complies with the provisions of the Penn Township Zoning Regulations, a certificate of occupancy will be issued. THIS PERMIT DOES NOT VERIFY COMPLIANCE WITH THE I.R.C. OR ANY OTHER BUILDING CODES.

YOU MUST PROVIDE A TELEPHONE NUMBER

Signature of Applicant _____ Date _____

A fee of \$50.00 must accompany this application for residential use.
A fee of \$100.00 must accompany this application for commercial use.

MAKE CHECKS PAYABLE TO PENN TOWNSHIP

SEWAGE AUTHORITY USE ONLY

Passed Date _____ Failed Date _____ (No occupancy permit will be issued)

PTSA Signature _____ FTMSA Signature _____

Permit Issued Date _____ Permit Denied Date _____

Penn Township Rep. _____