

West Newton Borough
APPLICATION FOR OCCUPANCY INSPECTION
CONTACT: ZONING OFFICER MIKE STACK AT 724-493-7793

PERMIT NUMBER _____ FEES: _____
INSPECTION DATE _____ RE INSPECTION DATE _____

ZONING DISTRICT _____ RESIDENTIAL _____ COMMERCIAL _____

PROPERTY ADDRESS _____

TENANT'S NAME _____ PHONE NUMBER _____

OWNERS NAME _____ PHONE NUMBER _____

OWNERS ADDRESS _____

BUILDING DESCRIPTION:

TAX ID NUMBER _____ GARAGE: _____
NUMBER OF ROOMS _____ APARTMENT NUMBER _____ DETACHED _____ INTEGRAL _____
NUMBER OF BATHS _____

PROSPECTIVE TENANT/BUYER _____

MAILING ADDRESS _____

NON CONFORMING _____ BUSINESS _____

STRUCTURE: SINGLE _____ 2 FAMILY _____ 3 FAMILY _____ APARTMENT _____ WITH _____ UNITS IN BUILDING _____

REMARKS: (LIST ALL SPECIAL NEEDS I.E. WHEEL CHAIR, ETC) _____

PROPOSED USE OF PROPERTY: _____

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT. THE ABATEMENT OF BOROUGH VIOLATIONS WILL BE COMPLIED WITH BY THE OWNER, OR HIS DESIGNATED AGENT, UNLESS OTHERWISE STATED IN THE AGREEMENT OF SALE. I AM AWARE THAT MISREPRESENTATION OF ANY INFORMATION MAY RESULT IN FINES OR IMPRISONMENT.

SIGNED: _____ DATE: _____

PERMIT: ISSUED _____ DENIED _____ DATE OF ISSUANCE _____

SIGNATURE OF BUILDING INSPECTOR/CODE ENFORCEMENT OFFICER _____