



UPPER CHICHESTER TOWNSHIP
 P.O. BOX 2187, Upper Chichester, PA 19061
 Ph: 610-494-3010 Fax: 610-494-2130

DATE: _____

CERTIFICATE OF OCCUPANCY APPLICATION

For RENTAL/LEASE (RESIDENTIAL OR BUSINESS CHANGE IN TENANT OR ANNUAL)

TYPE OF RENTAL: Residential Commercial

Property Information (hereby applies for Certificate of Occupancy for the following property)

ADDRESS: _____
Apt # City State Zip

FOLIO #: _____

Applicant Information

APPLICANT: Owner Tenant Agent Other _____

NAME OF AGENCY/BUSINESS (if applicable): _____

NAME : _____ Phone: _____

ADDRESS: _____ Fax: _____

_____ Email: _____

City State Zip
 Applicant's Notification Preference: Email Mail Fax

Fee Schedule

RESIDENTIAL RENTAL FEE:
 \$50.00/Unit - Change of Occupancy (Apartments, Condos, Houses)
 \$50.00/Unit - Annual Renewal (Apartments, Condos, Houses)
 \$35.00/Unit - Reinspection (Apartments, Condos, Houses)
 \$50.00/Unit - Common Area

COMMERCIAL TENANT INSPECTION FEES:
 \$125.00/Unit - Change of Occupancy
 \$35.00/Unit - Reinspection

Inspection Contact Information (Person to contact to schedule inspection)

Name: _____ Phone: _____

AS PROVIDED BY ORDINANCE NO. 456 Total Number of Rental Units: _____

Tenant Information (Please list all Occupants)

FIRST AND LAST NAMES OF ALL TENANTS INCLUDING CHILDREN	Address	Unit Number	Phone Number

 SIGNATURE OF APPLICANT

For additional Tenant listing please use backside

