



UPPER CHICHESTER TOWNSHIP

P.O. BOX 2187, Upper Chichester, PA 19061

Ph: 610-494-3010 Fax: 610-494-2130

DATE: _____

**RE-INSPECTION
RESALE CERTIFICATE OF OCCUPANCY APPLICATION**

(RESIDENTIAL OR COMMERCIAL CHANGE OF OWNERSHIP)

TYPE OF RESALE: Residential Commercial

Property Information

Hereby applies for Certificate of Occupancy for the following property:

ADDRESS: _____
Apt # City State Zip

Applicant Information

APPLICANT: Agent Buyer Seller Other _____

NAME OF AGENCY/BUSINESS (if applicable): _____

NAME : _____

ADDRESS: _____
City State Zip

PHONE: _____ FAX: _____

EMAIL: _____

Applicant's Notification Preference: Email Mail Fax

If Applicable: **Conditional Sale:** YES or NO

Settlement Date: _____ Lock Box #: _____

NEW OWNER'S NAME:

NAME: _____

ADDRESS: _____
City State Zip

PHONE: _____ EMAIL: _____

SIGNATURE OF APPLICANT

FEES:

Residential Change of Ownership (Single Family, etc)

\$35.00/ Unit - Per Re-inspection

Commercial Change of Ownership

\$35.00/ Unit - Per Re-inspection

For information regarding your inspection, please contact our Zoning Officer @ 610-494-3010