



620 Franklin Farms Road
 Washington, Pennsylvania 15301
 Phone: 724-228-3330
 Fax: 724-228-2150

APPLICATION FOR CERTIFICATE OF OCCUPANCY

Address of Property: _____

Current Owner: _____ Phone: (____) ____ - _____

Type of Structure: _____ Sq. Footage: _____

New Owner's Name: _____ Phone: (____) ____ - _____

Address: _____

Name of Tennant(s) or Renter: _____

The following inspections completed by North Franklin Township (or Third Party Inspection Agency) and approved:

1. Exterior Maintenance of Property
2. Smoke Detectors and Alarm Systems installed and operable
3. Electrical Inspections performed and cleared
4. Mechanical Inspections performed and cleared
5. Plumbing Inspections performed and cleared
6. Contractor information completed
7. Residential / Commercial Inspections performed and cleared
8. Zoning Enforcement performed and cleared
9. Real Estate Tax Collector information cleared

 Signature of Owner / Occupant

 Signature of NFT Representative

Date of Inspection: _____

Occupancy Permit # : _____

APPROVED / DENIED

NATURE OF DENIAL: _____

ALL ITEMS MUST BE CORRECTED BEFORE PERMANENT OCCUPANCY PERMIT IS ISSUED. PLEASE BE ADVISED THAT TEMPORARY CERTIFICATES MAY BE ISSUED FOR A SPECIFIED TIME PERIOD. INFORMATION WILL NOT BE FORWARDED TO CLOSING COMPANY UNTIL ALL ITEMS ARE CORRECTED AND REINSPECTED.

 Signature of Inspector

 Date