Certificate of Use and Occupancy Application

_____ *Municipality*

_____ *County*

APPLICATION FOR CERTIFICATE OF USE AND OCCUPANCY

Location (Exact Street Address)		Business Name	
Proposed Use		Current Use (or previous use if vacant)	
What part of the building will you occupy?	How much space? (Square Footage)	Is space now vacant?	How long has it been vacant?
☐ First Floor ☐ Second Floor ☐ Basement ☐ Third Floor ☐ Fourth Floor ☐ Other _____		□ Yes □No	

	Applicant	Owner	Additional Contact
Name			
Firm Name			
Address			
City/State/Zip			
Phone			
Fax			

Mail Certificate to (check one): □ Applicant □ Owner □ Additional contact

Who will meet the inspector at the property? (check one) □ Applicant □ Owner □ Additional Contact

The undersigned hereby attests to the above information as accurately describing the premises and proposed occupancy to the best of his/her knowledge and ability and that he/she has the permission of the owner(s) or agent to make this application and allow all necessary inspections of the premises. Any falsification or misinformation may result in enforcement of penalties prescribed in local ordinance and state law. The undersigned understands that completion of this form does not allow occupancy of the premises.

_____ _____

Signature of Applicant Date

DO NOT WRITE BELOW THIS LINE – FOR OFFICIAL USE ONLY

Application Checklist			**Inspections**
Zoning Approval:	☐ Special Use	☐ Variance	Inspections have been scheduled as follows: □ Building/Construction □ Plumbing □ Electrical □ Fire/Sprinkler □ Health Department Contact Building Code Department to schedule all necessary inspections. Office Hours are Monday through Friday 8 am to 4 pm. 717 262-0081 Inspector assigned to this job is:
Granted:	Expires:	Case #	
☐ Capacity placard required ☐ Capacity calculation required ☐ State Health Department approval required			
☐ Property has a boiler ☐ Property has an elevator ☐ Property has a sprinkler system			
Use and Occupancy Type (Ch.3):	Type of Construction (Ch.6)	Design Occupant Load:	
Checked by Building Code Official:		☐Fee Paid:	
Certificate #	Date issued:	Cancelled or rejected:	

Commonwealth Code Inspection Service, Inc.
1102 Sheller Avenue, Suite B, Chambersburg, PA 17201
(717) 262-0081 • (717) 263-3546 Fax