

Caernarvon Township

3307 Main Street
P.O. Box 294
Morgantown PA 19543

Code Enforcement Department

Permit No. _____

page 1 of 2

Application For USE & OCCUPANCY Permit

rev. 1 (April 2002)

PART A: To Be Completed By Owner/Applicant

Name Of Property Owner:		Address:	
Phone No:			
Name Of Business:		Address:	
Phone No:			
Owner of Business/Contact Person:		Address:	
Phone No:			
Property Location:			
Subdivision Name:		Lot No:	Zoning District:
Tax PIN:	Lot Area:	Business Area:	

Type of Business: _____

STATEMENT BY APPLICANT:

I hereby certify that I am the PROPERTY OWNER/AGENT of PROPERTY OWNER and that I am authorized to make this application. Further, I/we agree to adhere to all applicable Caernarvon Township Ordinances and Regulations.

Signature of Applicant: _____ Date: _____

Signature of Property Owner/Agent: _____ Date: _____

ADDITIONAL INFORMATION:

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Caernarvon Township

Main and Chestnut Streets
P.O. Box 294
Morgantown PA 19543

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PART B: TO BE COMPLETED BY THE ZONING OFFICER

Additional Approvals:

	Permit No.	Date
<input type="checkbox"/> Plumbing	_____	_____
<input type="checkbox"/> Driveway	_____	_____
<input type="checkbox"/> Fire Code	_____	_____
<input type="checkbox"/> Public Water	_____	_____
<input type="checkbox"/> On-Lot Sewage Disposal	_____	_____
<input type="checkbox"/> Public/Community Sewage Disposal	_____	_____
<input type="checkbox"/> Industrial Waste Discharge	_____	_____
<input type="checkbox"/> Labor & Industry	_____	_____

Fees:

Building Permit: \$ _____
Plumbing Permit: \$ _____
Driveway Permit: \$ _____
Fire Code Permit: \$ _____
TOTAL DUE: \$ _____

Check No. _____
Date Paid: _____

Approval/Denial:

Application Approved Permit Expiration Date: _____
 Application Denied

Reason(s) for Denial: _____

Zoning Officer's Signature: _____

Date: _____