



MUNICIPAL BUILDING
155 LEXINGTON AVENUE
EAST LANSDOWNE, PA 19050
(610) 623-7131

BOROUGH OF EAST LANSDOWNE

Delaware County, Pennsylvania

USE & OCCUPANCY APPLICATION

Change of use Resale Temporary/Good for 1 year
 Change of proprietorship Construction/fire or water damages
 New Rental Property

(Please check the appropriate box needed)

PLEASE NOTE: THE PROCESSING OF THIS APPLICATION REQUIRES APPROXIMATELY TWO WEEKS.

FEE: MAY BE PAID WITH CHECK, CASH OR MONEY ORDER AND MADE PAYABLE TO **EAST LANSDOWNE BOROUGH**. PLEASE ENCLOSE A SELF-ADDRESSED STAMPED ENVELOPE WITH THE CHECK FOR RETURN OF YOUR U&O CERTIFICATE.

RESIDENTIAL FEE: \$100.00/PER UNIT

BUSINESS FEE: \$125.00

U&O APPLICATION MUST HAVE ALL ATTACHED FORMS FILLED OUT COMPLETELY WITH A CHECK ENCLOSED. IF THE APPLICATION IS NOT FILLED OUT COMPLETELY IT WILL NOT BE PROCESSED AND NO NOTIFICATION WILL BE SENT.

PLEASE MAIL YOUR APPLICATION AND ENCLOSED CHECK TO:

GLENICE THOMAS, BOROUGH SECRETARY
155 LEXINGTON AVENUE
EAST LANSDOWNE, PA 19050

For inspection, please call:

LINN ARCHITECTS

1140 N. PROVIDENCE ROAD
MEDIA, PA 19063
TEL: 610.566.7044
FAX: 610.566.3323

BUILDING CODE OFFICIAL

ROBERT MOULD
EAST LANSDOWNE BOROUGH
TEL: 610.623.7131
FAX: 610.259.2636

PERMIT # _____

USE & OCCUPANCY APPLICATION

DATE: _____

Ordinance #315 – requires all properties to have proper numbering in a visible way. Does property have visible house numbers, three (3) inches high? _____.

PROPERTY LOCATION: _____

APPLICANT: _____ ADDRESS: _____

TELEPHONE #: _____ CELL: _____

SELLER: _____ ADDRESS: _____

TELEPHONE #: _____ CELL: _____

BUYER: _____ ADDRESS: _____

TELEPHONE #: _____ CELL: _____

BUILDING TYPE: RESIDENTIAL: _____
Specify type of construction and number of units

COMMERCIAL: _____
Specify type of building and height

Smoke Detectors: Ordinance #344 requires one (1) smoke detector on each level including the basement.

PRESENT USE: _____ PROPOSED USE: _____

SETTLEMENT DATE: _____

TITLE COMPANY: _____ ADDRESS: _____

RESIDENTIAL FEE: \$100.00 PER UNIT COMMERCIAL BUSINESS FEE: \$125.00

USE & OCCUPANCY APPLICATION

The processing of this application requires approximately two (2) weeks. The fee may be paid with check, cash or money order and made payable to East Lansdowne Borough, 155 Lexington Avenue, East Lansdowne, PA 19050.

The undersigned certifies that the statement made in the foregoing application for Use Certification Statement are true and correct to the best of his/her knowledge, information, and belief, and are made subject to the penalties of 18 Pa C.S. Sec 4904, relating to unsworn falsification to authorities.

NOTE:

I hereby acknowledge that the above requirements for a Use & Occupancy License must be completed prior to the initial inspection. If the first (1st) inspection is a failure you must call the inspector to set up a re-inspection at no additional cost. A No-Show of the initial scheduled inspection will count as a failed inspection and an automatic re-inspection will be required.

Any subsequent inspection due to a failure of the second (2nd) re-inspection or a No Show of the second (2nd) re-inspection will result in a fee of fifty (\$50.00) for each additional re-inspection.

SIGNATURE: _____ DATE: _____



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COMMERCIAL AND RESIDENTIAL ZONING USE APPLICATION

APPLICATION IS HEREBY MADE FOR A ZONING USE IN CONNECTION WITH THE FOLLOWING PROPERTY

EXACT LOCATION OF PROPERTY: _____

OWNER OF PROPERTY	APPLICANT
NAME:	NAME:
ADDRESS:	ADDRESS:
CITY/TOWN:	CITY/TOWN
STATE:	STATE:
ZIP CODE:	ZIP CODE:
PHONE:	PHONE:
EMAIL:	EMAIL:

NAME OF PROPOSED TENANT: _____

CURRENT AND/OR PRIOR USE: (IF VACANT DESCRIBE THE MOST RECENT USE)

PROPOSED USE OF BUILDING AND/OR PROPERTY

THE BOROUGH RESERVES THE RIGHT TO REQUIRE ADDITIONAL INFORMATION.
IF THE DESCRIPTION REQUIRES MORE SPACE, SUBMIT ON A SEPARATE SHEET.

ZONING APPLICATION FEE = \$25.00

MAKE CHECK OR MONEY ORDER PAYABLE TO: BOROUGH OF EAST LANSDOWNE

PLEASE READ AND COMPLY WITH THE FOLLOWING ITEMS:

I hereby authorize the designated East Lansdowne and or code administrator official to investigate, inspect, and examine the property set forth herein, including land and structures, to determine compliance with the East Lansdowne zoning ordinance and PA act 45 (Uniform Construction Code) and to determine the accuracy of the statements contained herein.

I am aware that I cannot occupy the property for the purpose of conducting the use set forth herein and cannot commence excavation or construction until a zoning and or Building Permit has been issued by the Borough of East Lansdowne. I am aware that I cannot change the use of the property herein until I have applied for and receive a Zoning Permit and or Building Permit for such proposed use. By signing this application, I certify that all facts in the application and all accompanying documentation are true and correct. This application is being made by me to induce official action on the part of East Lansdowne Borough, and I understand that any false statements made herein are being made subject to the penalties of 18 PA C.S. 4904 relating to unsworn falsification to authorities.

The issuance of a Zoning Permit and or Building Permit is based upon the facts stated and representations made in this application. A Zoning Permit and or Building Permit may be revoked if the use and /or structure, for which it has been issued, violate any applicable Borough, County, State or Federal law or regulation, including but not limited to the East Lansdowne Borough Zoning Ordinance and PA Act 45 (Uniform Construction Code). This Permit may also be revoked if it has been issued in error or if issuance was based upon any misrepresentations or errors contained in the application or otherwise made by the applicant.

The Permit holder is advised that persons aggrieved by a use or development permitted on the land of another may file an appeal with the East Lansdowne Borough Zoning Hearing Board seeking revocation of any Permits issued or approvals granted within thirty (30) days from the issuance of such Permit, or at a later date if such aggrieved person alleges and proves that he had no notice, knowledge or reason to believe that such approval had been given.

SIGNATURE REQUIRED

Applicant Printed Name: _____

Applicant Signature: _____

Date: _____

FOR OFFICIAL USE ONLY DO NOT WRITE BELOW THIS LINE
PROPERTY ADDRESS:
ZONING CLASSIFICATION:
TAX FOLIO #:
DATE RECEIVED:

This Zoning Permit has been approved by: _____
East Lansdowne Borough Official