

## **Certificate of Occupancy Permit Application**

Tenant Business Name:					
Tenant Business Address (include suite/floor):					
Business Owner Name:					
	Phone:				
Property Owner Name:					
Property Owner Address:					
City, State & Zip Code:					
Email:	Phone:				
PROPOSED Type of Business (description of activity):					
Zoning District:	-				
Proposed Number of Employees:	Number of Vehicle Parking Spaces:				
U&O will not be processed without the attack	hed completed Certificate of Occupancy Sign-Off Sheet				
	Date:				
(copy of signed lease must be attached)					



1130 N. Bethlehem Pike Spring House, PA 19477 215.646.5302

## **CERTIFICATE OF OCCUPANCY SIGN-OFF SHEET**

## FINAL CONSTRUCTION MUST COMPLY WITH APPROVED RECORD PLAN

PROJECT ADDRESS:	
BUILDING PERMIT #:	

PASS/FAIL	FINAL INSPECTION DATE (INITIAL)	INSPECTOR	COMMENTS
		COMMERCIAL INSPECTOR	
		KELLI SCARLETT X 368	
		RESIDENTIAL INSPECTOR	
		BOB ALTMAN X 313	
		ZONING OFFICER	
		STEVE WARE X 307	
		FIRE MARSHAL	
		AL COMLY	
		215.205.9670	
		TOWNSHIP ENGINEER	
		GILMORE & ASSOCIATES	
		215.345.4330	

COMPLETED FORM IS TO BE SUBMITTED TO PATTY FURBER (pfurber@lowergwynedd.org)

OCCUPANCY PERMIT WILL BE ISSUED AFTER FINAL INSPECTIONS ARE APPROVED AND SIGNED OFF BY EACH INSPECTOR