

PATTERSON TOWNSHIP

1600 19th AVENUE BEAVER FALLS, PA. 15010-2868

PHONE 724-843-8339 EXT 421 FAX 724-843-8687

E-MAIL r.morrow2@pattersontwp.com

OCCUPANCY LICENSE REGISTRATION FORM

OWNER: _____
FIRST M LAST

ADDRESS: _____
(OF TENANT) STREET CITY STATE ZIP

PHONE NUMBER: _____ FAX: _____
(OF OWNER)

TENANTS NAME: _____
FIRST M LAST

TENANTS PHONE NUMBER: _____ NUMBER OF OCCUPANTS _____

TENANTS OCCUPATION: _____

PROPERTY MANAGER (IF APPLICABLE): _____

ADDRESS OF MANAGER: _____

MANAGER'S PHONE: _____ FAX: _____

*ALL RENTAL UNITS WILL BE INSPECTED WITHIN THREE YEARS OF LICENSE BEING ISSUED. PLEASE CALL THE TOWNSHIP OFFICE-CODE ENFORCEMENT DEPARTMENT AT 724-843-8339 TO SET UP AN APPOINTMENT.

APPLICANTS SIGNATURE _____ DATE: _____
(OWNER OR MANAGER)

CODE OFFICIAL SIGNATURE: _____ FILE #: _____

ALL REGISTRATION FEES MUST BE PAID AT TIME OF REGISTRATION

PLEASE MAKE CHECK PAYABLE TO: PATTERSON TOWNSHIP

REGISTRATION FILED: _____ INSPECTION FEE PAID: _____
DATE AMOUNT

OFFICIAL DOCUMENT PATTERSON TOWNSHIP