

SPRINGETTSBURY TOWNSHIP

APPLICATION FOR RESIDENTIAL CERTIFICATION OF USE & OCCUPANCY

1501 Mt. Zion Rd. York, PA 17402 (717) 757-3521

Email application and supporting documents to Permits@springettsbury.com

**RESIDENCE
ADDRESS** _____

Applicant's Name _____ **Telephone** _____

Email Address _____

Owner's Name _____ **Telephone** _____

Email Address _____

Address _____

City _____ **State** _____ **Zip Code** _____

Description/Proposed Use _____

I hereby certify that this proposed use is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her agent and we agree to conform to all applicable regulations of this jurisdiction. Please be advised, the Springettsbury Township Zoning Ordinance is available for your review at the township website www.springettsbury.com. It is the applicant's responsibility to conform to all regulations put forth in the Springettsbury Township Zoning Ordinance.

Applicant Signature

Printed Name

Date

*(C&O inspection is required prior to occupancy.
Please call the Township at least 48 hours in advance to schedule your inspection)
Do not submit prepayment. Fee will be invoiced.*

Rev 01/21