

BOROUGH OF HATBORO COMMERCIAL USE & OCCUPANCY/FIRE MARSHAL INSPECTIONS

414 South York Road
Hatboro, PA 19040
(215) 443-9100

APPLICATION

PROPERTY LOCATION: _____

Applicant: _____ Business Phone: _____ Property Owner: _____

Applicant's Home Address: _____ Home Phone: _____

Business Name: _____ Type of Business: _____

What will be stored: _____

**APPLICATION IS HEREBY MADE UNDER ORDINANCE OF THE BOROUGH OF HATBORO FOR
ISSUANCE OF AN OCCUPANCY PERMIT**

Date: _____ 20 _____ Signature of Applicant: _____

BOROUGH USE ONLY

Application Complete: Y ~ N Curb/Sidewalk Permit Required: _____ Application Fee: _____

Fire Marshal Inspection Fee: _____

Zoning: _____ Does proposed use comply _____ Zoning Review Fee \$50.00

TOTAL FEES: \$ _____

Date of Inspection: _____ Time: _____

INSPECTION

REVISIT

Safety Valve Extension Tube:	Pass	Fail	N/A	Tube must be 3" - 6" from floor	P	F
Sump Pump:	Pass	Fail	N/A	Comment _____	P	F
Electrical:	Pass	Fail	N/A	Comment _____	P	F
This electrical inspection is cursory. Certification by a UL inspector is:				Mandated	Recommended	N/A
Doors/Windows:	Pass	Fail	N/A	Comment _____	P	F
Interior Stairs/Rails:	Pass	Fail	N/A	Comment _____	P	F
Hand or Guard Rails:	Pass	Fail	N/A	Comment _____	P	F
Ceilings/Floors:	Pass	Fail	N/A	Comment _____	P	F
Sanitary Toilets/Sinks:	Pass	Fail	N/A	Comment _____	P	F
Exterior Steps:	Pass	Fail	N/A	Comment _____	P	F
Exterior Signs/Lights:	Pass	Fail	N/A	Comment _____	P	F
Building Address:	Pass	Fail	N/A	3 INCHES OR TALLER - MUST BE VISIBLE FROM ROAD	P	F
Sidewalks/Curbs:	Pass	Fail	N/A	Comment _____	P	F
Exit Signs:	Pass	Fail	N/A	Comment _____	P	F
Emergency Lighting:	Pass	Fail	N/A	Comment _____	P	F

Comments: _____

CAN A CLEAR U&O BE USED: YES NO TEMPORARY (How many days): _____

TIME: _____ DATE: _____ INSPECTOR: _____ TITLE: _____

(Signature of Applicant)