



USE & OCCUPANCY INSPECTION APPLICATION

DATE: _____

PROPERTY ADDRESS: _____

TAX ID NUMBER: _____

PROPERTY OWNER: NAME, EMAIL, AND PHONE: _____

PROPERTY BUYER: NAME, EMAIL, AND PHONE: _____

SETTLEMENT DATE: _____

SELLER'S AGENT: NAME, EMAIL, AND PHONE: _____

CONTACT FOR SCHEDULING INSPECTION: _____

FOR OFFICE USE ONLY:
INSPECTION DATE AND TIME: _____

*Application Fee \$120.00 payable to Chester Heights Borough EMAIL TO: Info@chesterheights.org
USPS Mail to: PO Box 658, Chester Heights, PA 19017
FEDEX to: 53 W. Baltimore Pike, 2nd Floor, Media, PA 19063
Office Hours: 8:00am – 4:00pm Monday through Friday, Holidays may change hours*