



THE MUNICIPALITY OF NORRISTOWN
BUILDING & CODE ENFORCEMENT DEPARTMENT



Dear Property Owner:

Thank you for taking the time to assist the Code Department staff with processing your Use and Occupancy Permit Application. In order to facilitate the process we ask that you take a few seconds to review the submittal procedures listed below and then complete the applicable forms. Attached you will find the following:

Effective January 5, 2011 an approved zoning use registration permit must accompany all applications for a transfer of property or change of tenant submitted to the Code Department. Under no circumstances will a transfer permit application be accepted if the zoning permit is not included.

Property Transfer/Commercial Change of Tenant or Owner Application (Pages 1-2). Please complete all of the sections that are applicable to your situation. In the event that the sections specific to the property transfer are not completed in full the application will be returned until such time as the information is available.

Fire Department Emergency Contact Form (Page 3). This form must be completed at the time of application for all multi-family occupancies (three or more dwelling units) and all commercial properties. The information contained on this form is forwarded to the Montgomery County Emergency Dispatch Center for use in the event of a Police, EMS or fire emergency at the property.

All applications and associated fees must be submitted to the Code Department **thirty (30) days prior to the date of transfer.** A member of the Code Staff will then contact the responsible party indicated on the application in order to schedule a suitable time and date for the required inspection.

At the time of inspection, the inspector will verify compliance with all of the 2012 International Property Maintenance and the Municipality of Norristown's codes and ordinances related to fire and safety. At the conclusion of the inspection, the responsible party will receive a report containing all code violations observed, possible remedies for such and a deadline for compliance. **The Municipality of Norristown performs non-invasive, visual inspections for code compliance.**

If you have any questions or would like to discuss any of the matters in further detail, you can visit the Code Department located on the second of the Norristown Municipality Administration Building at 235 East Airy St, Norristown, PA 19401 or call at 610-270-0441, between the hours of 8:30 AM to 4:30 PM, Monday to Friday.

Thank you,

Municipality of Norristown Code Enforcement Department.

Municipality of Norristown
235 East Airy Street
Norristown, Pa. 19401
Business: (610) 270-0441
Fax: (610) 279-7548

For Office Use Only	Date Application Received:
Fee \$ _____ .00	Received by: _____
0 Cash 0 Check # _____	
Parcel # 13- _____	
Zoning Use Registration Permit# _____	

PROPERTY TRANSFER/ CHANGE OF TENANT PERMIT APPLICATION

Please print or type all information. Incomplete applications **CANNOT** be accepted.

SECTION 1. Zoning Compliance. In order to verify that all zoning requirements have been met for a property of 2 or more residential units or a commercial property, a copy of a signed zoning use registration **MUST** be attached to this application at the time submittal.

SECTION 2. Reason for Application (Check Appropriate Condition)

- | | |
|--|--|
| <input type="checkbox"/> Residential Owner Occupied Transfer | <input type="checkbox"/> Residential Rental Occupancy Sale |
| <input type="checkbox"/> Commercial Sale/Transfer of Ownership | <input type="checkbox"/> Commercial Change of Tenant |
| <input type="checkbox"/> Commercial / Residential Change of Occupancy Classification | |
| <input type="checkbox"/> Blighted Property Occupancy Inspection | |

Location of Property: _____ Floor and/or Suite and/or Apt # _____

SECTION 3: Occupancy Classification/Use Group Information. Please indicate the present occupancy type/use group. (If the building is mixed use, mark all of the appropriate classification/use groups).

- | | |
|---|--|
| 1. <input type="checkbox"/> One Family Dwelling | 7. <input type="checkbox"/> Mercantile |
| 2. <input type="checkbox"/> Two Family Dwelling | 8. <input type="checkbox"/> Business(professional offices) |
| 3. <input type="checkbox"/> Apartment/Condominium Building # of Units _____ | 9. <input type="checkbox"/> Factory/ Industrial |
| 4. <input type="checkbox"/> Rooming and Lodging House # of Units _____ | 10. <input type="checkbox"/> Storage |
| 5. <input type="checkbox"/> Place of Assembly. Occupant Load _____ | 11. <input type="checkbox"/> Utility |
| 6. <input type="checkbox"/> Educational | 12. <input type="checkbox"/> Other _____ |

If the use is other than residential, please provide a brief description of the activities/processes conducted therein: _____

SECTION 4. Present Owner

Name(s): _____
Address: _____
City: _____ State: _____ Zip Code: _____
Daytime Phone: _____ Cell Phone: _____

SECTION 5. New Owner/Buyer

Name(s): _____
Address: _____
City: _____ State: _____ Zip Code: _____
Daytime Phone: _____ Cell Phone: _____

If new owner is a Company, Corporation, LLP, ETC please provide the following information.

Chief Operating Officer(s): _____
Address: _____
City: _____ State: _____ Zip Code: _____
Daytime Phone: _____ Cell Phone: _____

Section 6. If a residential occupancy is involved, does the buyer intend to occupy or reside at the location? **Yes** **No**

(If the answer is No, the property must conform to the Municipalities annual rental registration requirements the application forms and fee schedule for which can be obtained in the code department offices.

Section 7. FOR COMMERCIAL CHANGE OF TENANT ONLY

Current Use Classification (select from the categories listed in Section 3 and provide a brief description)

Proposed Use Classification (select from the categories listed in Section 3 and provide a brief description)

Commercial Tenant Business Name: _____

Nature of the business _____

Corporate Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Contact Name: _____ Title: _____

Daytime Phone: _____ Cell Phone: _____

Please note that certain information regarding the new commercial occupancy must be forwarded to the Norristown Fire Department for inclusion in the Montgomery County Emergency Services database for use during a fire or other type of emergency. Please complete the attached form and forward to the Norristown Fire Marshal Office. A certificate will not be issued until such time as the Fire Marshal confirms receipt.

Application is hereby made to the Municipality of Norristown for the approval to use and occupy the aforementioned location in full or part. I agree to comply with all Ordinances and Codes of the Municipality of Norristown and the Commonwealth of Pennsylvania. I will not occupy or allow occupancy of any land, structure or building until a Certificate of Occupancy is issued. I understand that any misrepresentation in this application will be grounds for the revocation of the application or the Certificate of Occupancy & Use.

Owner's Name (please print)

Owner's Signature

Date

I hereby certify that this application is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her agent.

Agent's Name (please print)

Agents Signature

Date

Representing (company or firm)

Telephone Number

Norristown Occupancy Information Form

2.22.10

Business Address _____

Business Name _____

Business Telephone Number _____ **Fax** _____

Business Owners Name _____

Address _____

Telephone Numbers (Home) _____ **(Cell)** _____

Email Address _____

Property Owners Name _____

Address _____

Telephone Numbers (Home) _____ **(Cell)** _____

Email Address _____

Emergency Contact Information (1)

Name _____ **Title** _____

Home _____

Cell _____

Emergency Contact Information (2)

Name _____ **Title** _____

Home _____

Cell _____

Emergency Contact Information (3)

Name _____ **Title** _____

Home _____

Cell _____

Alarm Company Name _____

Telephone Number _____

Please return this form to:

Charles Sweeney
Fire Marshal
235 East Airy Street
Norristown, PA 19401
(610)270-2894
(610)292-8090 fax
csweeney@norristown.org