



CERTIFICATE OF OCCUPANCY REQUEST FORM

105 Government Center Way
Pocono Pines, PA 18350
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To be faxed, emailed, or mailed to Tobyhanna Township when ready for final inspection

Property Owner: _____ Phone: _____

Mailing Address: _____ Email: _____

Contractor: _____ Phone: _____

Physical Address: _____ Subdivision: _____

Tap Map ID No.: _____ Zoning Permit No.: _____

Newly Constructed Structure: _____

| <u>The following has been complied with:</u> | YES | NO | N/A |
|---|-----|-----|-----|
| Sewer Permit (alarm on, ready for final) | ___ | ___ | ___ |
| Zoning Permit | ___ | ___ | ___ |
| International/Residential Building Code | ___ | ___ | ___ |
| Act 167 (Watershed Stormwater Management) | ___ | ___ | ___ |
| Encroachment/HOP Permit | ___ | ___ | ___ |
| Subdivision & Land Development Ordinance | ___ | ___ | ___ |
| Sign Regulations | ___ | ___ | ___ |

By signing this application, I certify that I am aware that structures within the Township of Tobyhanna MAY NOT be used and/or occupied prior to receiving the Certificate of Occupancy. Failure to obtain said certificate PRIOR TO occupancy shall be subject to fines upon conviction in a summary proceeding.

Property Owner Signature: _____ Date: _____

DO NOT WRITE BELOW THIS LINE—FOR TOWNSHIP USE ONLY

| | | | |
|-----------------|---------------|---------------|---------------------------|
| Zoning: | Passed: _____ | Failed: _____ | Date of Inspection: _____ |
| SEO Inspection: | Passed: _____ | Failed: _____ | Date of Inspection: _____ |
| Comments: | _____ | | |
| SEO Officer: | _____ | | Date: _____ |
| Zoning Officer: | _____ | | Date: _____ |