CITY OF COATESVILLE PENNSYLVANIA

USE & OCCUPANCY COMMERCIAL APPLICATION

PART A

PLEASE COMPLETE FORM BY TYPING OR PRINTING LEGIBLY. ALL ASTERISKED (*) LINES MUST BE COMPLETED. SHADED BLANKS WILL BE COMPLETED BY THE CODES DEPARTMENT. INCOMPLETE FORMS WILL BE RETURNED OR DELAYED.

Name of Property Owner _____ Phone # _____

Address _____ Fax # _____

Name of Applicant/Business Owner _____ Phone # _____

Address _____ Fax # _____

Name of business _____

Business address _____

Property Location			
Subdivision Name/#		Lot No.	Zoning District
Tax PIN	Lot Area	Business Area	

Proposed use(s) as defined in Chapter 224, Zoning Ordinance of the City of Coatesville

_____

_____

ADDITIONAL INFORMATION (Include any details and information which you believe will be of assistance to the Zoning Officer):

_____

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_____

I hereby certify that I am the APPLICANT/BUSINESS OWNER and that I am authorized to make this application. Further, I/weagree to adhere to all applicable Ordinances and Regulations of the City of Coatesville .

_____ E-mail: _____

Please PRINT Name of Applicant/Business Owner

_____ Date: _____

Signature of Applicant/Business Owner

CODES DEPARTMENT
One City Hall Place, Coatesville, PA 19320 (610) 384-0300 Ext.3133 (610) 384-6051 (fax)