Borough of Doylestown

Department of Building and Zoning
Non-residential Use and Occupancy Permit Application

Background:

The Borough of Doylestown requires a Use and Occupancy Permit for all non-residential occupancies even if they are owner occupied.

Permit Application Procedure:

- Complete the section of this form marked "Property Information".
- Bring or mail this form to the Building and Zoning Office with the \$90 application fee for a commercial occupancy or \$110 for an industrial occupancy.
- Schedule an appointment for an inspection. An adult must be present at the time of inspection.
- If everything is in order the permit will be issued at the end of the inspection.
- If corrections must be made you will need to schedule a re-inspection with in 30 days of the date of the original inspection.
- Failure to obtain an occupancy permit or utilizing a space with out an occupancy permit may subject property owner and occupant to citations filed wit the court.

Standard Inspection Requirements:

- Property in safe and habitable condition
- Sidewalks and walkway in good repair
- Exterior of property maintained
- Grass and weeds cut
- Property address numbers and unit numbers are visible and at least 4 inches high
- No exposed wiring or extension cords being used as wiring
- Working exhaust fans in bathrooms with no operable windows
- Smoke detectors on each floor
- Mixed use occupancy fire alarms interconnected
- Inspected and installed fire extinguishers at least ever 75 feet (minimum 5 pound ABC)
- Electric panel closed and filled with breaker or blanks
- Outlet and switch plate covers in place
- Electric circuits labeled
- GFIC outlets in locations within 6 foot of water
- · Fire suppression system, alarm system, and fire extinguishers tested within a year
- Hoods over cooking surfaces clean and hood suppression system inspected within 6 months.
- · Handrails on stairs, guards as required on stairs, porches and decks
- No keyed locks (i.e. keyed deadbolts) on inside of egress ways
- All lighted exit signs must be illuminated and working
- All emergency lights must work (if you push button or kill power they should light)
- If required, zoning permit and/or accessibility certificate must be in hand
- Sign permit for all signs

Borough of Doylestown Department of Building and Zoning

Inspection date: Inspection time:

Non-residential Use and Occupancy Permit Application

PROPERTY INFORMATION:				
Property Address:	Unit/Apt:			
Owner Name:	Owner Phone:			
Owner Address:	Owner email:			
Tenant Name(s):	Tenant Phone:			
Proposed Use:				
	Current Use:			
Applicant Signature:	Date:			
Egilura to make repairs constitutes a violation of Device	town Dorovek Code of Oudiness Charles 40			
and or Chapter 5, parts 1-6 and may subject landlord an	town Borough Code of Ordinance Chapter 13, Part 701 et al.			
	d of tenant to citations.			
Items marked must be repaired or replaced:				
General Requirements (301.0 – 308.5)	Fire Safety Requirements, cont. (701.0 – 704.4)			
property address/unit ID(s) clearly marked	sprinkler control valves			
☐ sidewalks/ walkways	provide/repair egress lighting			
mark: fire lane/no parking/fd connection/sprinkler	egress blocked – remove obstructions			
exterior building repairs must be made:	remove interior door key locks/ install panic hardware			
□ stairways require handrail /guard □ zoning permit needed	alarms must be interconnected			
Other:	☐ fire extinguishers inspected, installed, unobstructed/ every (75') ☐ provide fire extinguisher (minimum rating 2A10BC min wt 5lb)			
Light, Ventilation, Occupancy Limitations (401.0 – 404.7)	provide K extinguisher			
bathroom vent fan must be present and working	post sign "Door to remain unlocked while building is occupied"			
☐ lighting in stairwell	install/maintain exit signs			
□ clothes dryer exhaust system	hazardous materials storage			
Plumbing, Mechanical, Electrical (501.0 – 607.0)	□ zoning			
☐ plumbing must be:	☐ housekeeping			
☐ gas water heater not properly installed/vented	□ other			
☐ fuel supply equipment correctly installed	Other Borough Ordinance Requirements			
have heating equipment serviced/cleaned	☐ sign permit needed			
outlets within 6' of water must be working GFCI type	☐ provide emergency contact information			
install outlet in/ remove extension cords replace covers /plates / window screens	L&I accessibility needed			
□ panel: circuits must be identified/ holes must be covered □ provide current elevator/boiler inspection certificate	□ zoning permit needed			
maintain 3' clearance from heat generating appliances	□ Notes:			
other:	- Notes.			
Fire Safety Requirements (701.0 – 704.4)				
☐ current fire alarm system inspection certificate must be provided				
☐ current sprinkler system inspection certificate must be provided				
post zone map /post exit/evacuation plan				
kitchen hood system must be inspected/cleaned	1st Inspection Date: 2nd Inspection Date: 3rd Inspection Date:			
□ post occupancy load certificate				
APPLICATION PROCESSING RECORD (Borough Office	Use Only) WATER DEPT. METER VERIFICATION:			
Amount Pd: Date: Check/Trans No:	Payor: Received by:			
·				
PERMIT ISSUANCE (Borough Office Use Only)				
	D			
Date: Inspector: Permit No:				
Keep this form. Once signed it is your Use and Occupancy Permit for the above listed tenants.				



BOROUGH OF DOYLESTOWN

Bucks County, Pennsylvania

APPLICATION FOR ZONING ACTIVITY REVIEW

TAX P	PARCEL # 08	ZONING DISTRICT		
1.	Property Address:			
2.	Business/Tenant Name:			
	Address:			
	Phone Number:	Email:		
3.	Applicant Name:	·····		
	Address:			
	Phone Number:	_Email:		
4.	Owner Name:			
	Address:			
]	Phone:	_Email:		
5.	Proposed Business Name:			
6.	Proposed use of Property:			
7.	Existing use of Property:			
8.	Floor Area (sf) # of Seats: _	# of On-Site Parking Stalls:		
Applica	ant Signature:	Date:		
	(Zoning Fee for Commercial is \$ 1	50.00 Residential is \$ 40.00) Paid:		
Zoning	Officer:	_ Approved Denied		
Comments:				

Doylestown Borough Emergency Contact Form

Property Address:		
Property Owner Information		
Name:	Phone:	
Property Management Contact		
Name:	Phone:	
Business Name:		
Business Owner Name:	Phone:	
In Case of an Emergency Contact:		
Primary Contact Name:	Phone:	
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