

Borough of Doylestown

Department of Building and Zoning

Residential Use and Occupancy Permit Application

Background:

The Borough of Doylestown requires a Use and Occupancy Certificate for all sales and changes of occupancy. Prior to a property being sold, or a landlord getting a new tenant, a new Use and Occupancy Certificate is required. Failure to apply for and receive a U & O can result in citations being filed against owners and tenants with no additional notice required.

Permit Application Procedure:

- Complete the section of this form marked "Property Information".
- Bring or mail this form to the Building and Zoning Office at 57 W Court Street with the \$50 application fee.
- 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 within 30 days of the date of the original inspection.
- Failure to obtain an occupancy permit or inhabiting a space without an occupancy permit may subject landlord and tenant to citations filed with the court.

Standard Inspection Requirements:

- property in safe and habitable condition
- sidewalks and walkway in good repair
- exterior of property maintained
- windows and screens intact
- grass and weeds cut
- property address numbers and unit numbers are visible and at least 4 inches high
- no exposed wiring
- working exhaust fans in bathrooms with no operable windows
- smoke detectors on each floor and every bedroom
- inspected and installed fire extinguisher (minimum 5 pound ABC)
- electric panel closed and filled with breaker or blanks
- outlet and switch plate covers in place
- electric circuits labeled
- chimney and connections clean and free from cracks
- wood stoves and fireplaces meet clearances and in good condition
- fire walls and fire doors between living space and garages
- handrails on stairs, guards as required on stairs, porches and decks
- no keyed locks (i.e. keyed deadbolts) on inside of egress ways
- egress windows in operating condition

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PROPERTY INFORMATION:	
Property _____	Unit/Apt: _____
Address: _____	
Owner Name: _____	Owner Phone: _____
Owner Address: _____	Owner email: _____
Tenant Name(s): _____	Tenant Phone: _____
Applicant _____	Date: _____
Signature: _____	

- Failure to make repairs constitutes a violation of Doylestown Borough Code of Ordinance Chapter 13, Part 701 et al. and or Chapter 5, parts 1-6 and may subject owner and/or tenant to citations.

Items marked must be repaired or replaced:

<p>General Requirements (301.0 – 308.5)</p> <ul style="list-style-type: none"> <input type="checkbox"/> property address/unit ID(s) clearly marked <input type="checkbox"/> sidewalks/ walkways <input type="checkbox"/> Grass/weeds must be cut to less than 8 inches <input type="checkbox"/> exterior building repairs must be made: <input type="checkbox"/> stairways require handrail /guard <input type="checkbox"/> Waste/Recycling <input type="checkbox"/> pool/ spa must have: <input type="checkbox"/> Other: _____ <p>Light, Ventilation, Occupancy Limitations (401.0 – 404.7)</p> <ul style="list-style-type: none"> <input type="checkbox"/> bathroom vent fan must be present and working <input type="checkbox"/> lighting in stairwell <input type="checkbox"/> clothes dryer exhaust system <input type="checkbox"/> number of occupants must not exceed <input type="checkbox"/> Other: _____ <p>Plumbing, Mechanical, Electrical (501.0 – 607.0)</p> <ul style="list-style-type: none"> <input type="checkbox"/> plumbing must be: <input type="checkbox"/> gas water heater not properly installed/vented <input type="checkbox"/> sump pit cover <input type="checkbox"/> heater working and can maintain 65 degrees minimum <input type="checkbox"/> chimney/vents/ducts must be cleaned/inspected <input type="checkbox"/> fuel supply equipment correctly installed <input type="checkbox"/> have heating equipment serviced/cleaned <input type="checkbox"/> outlets within 6' of water must be working GFCI type <input type="checkbox"/> install outlet in _____ <input type="checkbox"/> replace covers and plates <input type="checkbox"/> provide screens <input type="checkbox"/> maintain 3' clearance from heat generating appliances <input type="checkbox"/> other: _____ 	<p>Fire Safety Requirements (701.0 – 704.4)</p> <ul style="list-style-type: none"> <input type="checkbox"/> smoke alarm in each bedroom or sleeping space <input type="checkbox"/> smoke alarm in common area on each level of home <input type="checkbox"/> egress blocked – remove obstruction <input type="checkbox"/> remove interior door key locks <input type="checkbox"/> alarms must be interconnected <ul style="list-style-type: none"> <input type="checkbox"/> fire extinguisher inspected and installed in accessible location <input type="checkbox"/> provide fire extinguisher (minimum rating 2A10BC min wt 5lb) <input type="checkbox"/> sprinklers inspected <input type="checkbox"/> fire alarm system inspected <input type="checkbox"/> egress doors no inside key needed <input type="checkbox"/> hazardous materials storage <input type="checkbox"/> zoning <input type="checkbox"/> housekeeping <input type="checkbox"/> other inspection necessary <input type="checkbox"/> other: _____ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <p>OTHER ITEMS/ ADDITIONAL NOTES:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>			
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">1st Inspection Date: _____</td> <td style="width: 33%;">2nd Inspection Date: _____</td> <td style="width: 33%;">3rd Inspection Date: _____</td> </tr> </table>	1 st Inspection Date: _____	2 nd Inspection Date: _____	3 rd Inspection Date: _____
1 st Inspection Date: _____	2 nd Inspection Date: _____	3 rd Inspection Date: _____		

<input type="checkbox"/> Temporary Occupancy Certificate: Building may be occupied while violations are corrected.	<input type="checkbox"/> Temporary Access Certificate: Building shall not be occupied while violations are corrected.
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APPLICATION PROCESSING RECORD (Borough Office Use Only)

Amount Pd: _____ Date: _____ Check/Trans No: _____ Payor: _____ Received by: _____

PERMIT ISSUANCE (Borough Office Use Only)

Water Department Approval: _____ Date: _____

Date: _____	Inspector: _____	Expiration Date: _____ (Non-owner occupied)	Permit No.: _____
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Keep this form. Once signed it is your Use and Occupancy Permit.