

Occupancy Permit Application

South Strabane Twp.
550 Washington Rd.
Washington, PA 15301
724-225-9055



OCCUPANCY PERMIT APPLICATION FORM

TYPE OF REGISTRATION: ☐ CHANGE OF TENANT ☐ CHANGE OF OWNERSHIP
CHANGE OF USE

Property Address _____ Unit Number _____

Parcel Number _____ Change use from _____ To _____

Property Owner Name _____

Owner's Address _____ City _____ State _____ Zip _____

Phone _____ Mobile _____ Fax _____

E-mail Address _____

Prospective Tenant Name _____ Phone Number _____

Current Address _____ City _____ State _____ Zip _____

E-mail Address _____ Number of Occupants _____

Occupancy Fee: \$250

Please print clearly. Illegible and incomplete forms will not be accepted. Please remit payment with this application. For Corporations, a form of identification of an authorized officer of the company, or copy of a written agreement of the corporation's registered agent is required.

Applicant Signature

Print Name: _____

Signature: _____ Date: _____

For Office Use Only

Permit Number _____

Fee Paid \$ _____

Approved By _____

Date _____

REVISED 12/21/22