

**PERKIOMEN TOWNSHIP**  
**MONTGOMERY COUNTY**  
1 Trappe Road  
Collegeville, PA 19426  
610-489-4034  
610-489-4918 (Fax)

**APPLICATION FOR CERTIFICATE OF OCCUPANCY**

Property to Be Inspected: \_\_\_\_\_

Zoning District: \_\_\_\_\_

Applicant Name (**Signature required on page 2**): \_\_\_\_\_

Applicant Address: \_\_\_\_\_

Applicant Phone Number: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Present Owner: \_\_\_\_\_

New Owner: \_\_\_\_\_

Is The New Owner Of This Property Going To Reside There? Y/N \_\_\_\_\_

If "NO", Please Give Mailing Address of New Owner:  
\_\_\_\_\_

If Property Is to Be Used As a Rental Unit, Give Name Of  
Occupant/Tenant: \_\_\_\_\_

Type of Use: \_\_\_\_\_

If Changed, List Former Use: \_\_\_\_\_

Public      Private

Sewer: \* \_\_\_\_\_ (\*See Page 3)      Garbage Disposal: Y/N \_\_\_\_\_

Water: \_\_\_\_\_

Name & Phone Number of Person to Contact for Inspection of Property.  
\_\_\_\_\_

Email Address to Send Certificate: \_\_\_\_\_

Settlement Date: \_\_\_\_\_ Title Co.: \_\_\_\_\_

Fee To Be Submitted w/Application:

Residential      - \$ 50.00      Check # \_\_\_\_\_

Non-Residential      - \$100.00      Check # \_\_\_\_\_

USE AND/OR OCCUPANCY OF A PROPERTY OR TRANSFER OF OWNERSHIP  
WITHOUT A CERTIFICATE OF OCCUPANCY CONSTITUTES A VIOLATION OF THE  
CODE OF ORDINANCES OF PERKIOMEN TOWNSHIP AND MAY RESULT IN FINES OR  
CIVIL PROSECUTION.

*OFFICE USE ONLY*

*Date and Time of Inspection:* \_\_\_\_\_

*Permit No.:* \_\_\_\_\_

*Resale:* \_\_\_\_\_

*Block:* \_\_\_\_\_ *Unit:* \_\_\_\_\_

*Comments:* \_\_\_\_\_

**INSPECTIONS**

The validity of the Use and Occupancy Certificate is conditioned upon compliance with the Code of Perkiomen Township.

**NON-RESIDENTIAL INSPECTIONS:** Non-residential properties will be required to be in compliance with the Code of Perkiomen Township and with Commonwealth of Pennsylvania, Department of Labor and Industry.

**RESIDENTIAL INSPECTIONS:** A township official will perform an inspection for each property to determine compliance with the following list of items, however, additional items may be noted at the time of inspection. Should any of the specifically listed items below not be in compliance or if additional items are noted, the inspector will issue either a "Temporary Use & Occupancy Certificate" or a "Temporary Access Certificate" which shall be signed by the Buyer(s) and returned to Perkiomen Township within fourteen (14) days of the date of the Certificate or before settlement if less than fourteen (14) days. If either a "Temporary Use & Occupancy Certificate" or a "Temporary Access Certificate" is issued with conditions, all work required to obtain a clean "Certificate of Occupancy" shall be completed and the property re-inspected within twelve (12) months of settlement. Please note that a "Temporary Access Certificate" does not allow occupancy of the dwelling except to work on the property to correct indicated violations.

**SEWER INSPECTIONS:** The seller of property is responsible for hiring a plumber or plumbing company to camera the sewer lateral from the house/building to the sewer main for properties connected to public sewer. Once the camera inspection is complete, the plumber or plumbing company shall complete the attached affidavit and provide it to Perkiomen Township. A Certificate of Occupancy will not be issued without a completed affidavit.

**TO BE COMPLETED BY CODE ENFORCEMENT OFFICER:**

- 1) \_\_\_\_\_ **PROPERTY USE IS IN ACCORDANCE WITH ZONING.**
- 2) \_\_\_\_\_ **FUNCTIONING SMOKE DETECTOR AT EACH LEVEL, INCLUDING THE BASEMENT. (Detectors that are ten (10) or more years of age from manufactured date shall be replaced. The power source shall be equal to or better than detector(s) being replaced)**
- 3) \_\_\_\_\_ **FUNCTIONING SINKS AND TOILETS.**
- 4) \_\_\_\_\_ **FUNCTIONING GARBAGE DISPOSAL, IF APPLICABLE.**
- 5) \_\_\_\_\_ **WORKING FANS IN NON-VENTILATED BATHROOMS.**
- 6) \_\_\_\_\_ **GRASPABLE HANDRAILS AT ALL STAIRWAYS. (Interior & Exterior)**
- 7) \_\_\_\_\_ **NO OPENINGS IN CIRCUIT BREAKER BOX. (MUST BE SWITCHES OR BLANKS)**
- 8) \_\_\_\_\_ **NO VISIBLE OPENINGS IN INTERIOR WALL BOARD OR EXTERIOR WHICH ALLOWS WEATHER TO BREACH THE INTERIOR.**
- 9) \_\_\_\_\_ **NO VISIBLE EXPOSED UNCAPPED ELECTRIC WIRES, UNCOVERED ELECTRICAL BOXES, UNCOVERED RECEPTACLES, OR UNCOVERED SWITCHES.**
- 10) \_\_\_\_\_ **SUMP PUMP DISCHARGES TO EXTERIOR OF BUILDING.**
- 11) \_\_\_\_\_ **BUILDING ADDRESS VISIBLE & LEGIBLE FROM THE STREET OR ROAD FRONTING THE PROPERTY.**
- 12) \_\_\_\_\_ **CARBON MONOXIDE DETECTOR PRESENT.**
- 13) \_\_\_\_\_ **HOT WATER HEATER OR FURNACE, TEMPERATURE & PRESSURE RELIEF VALVE PIPE TERMINATES A MAXIMUM OF SIX (6) INCHES FROM THE FLOOR.**
- 14) \_\_\_\_\_ **NO DOUBLE CYLINDER LOCKS ON EGRESS DOOR(S). USE OF KEYS OR SPECIAL KNOWLEDGE TO EXIT THE DWELLING PROHIBITED.**
- 15) \_\_\_\_\_ **VISIBLE WORKING GFCI RECEPTACLES.**
- 16) \_\_\_\_\_ **SEWER LATERAL AFFIDAVIT RECEIVED FROM PLUMBER.**

**ADDITIONAL REQUIREMENTS:** \_\_\_\_\_

**I HAVE READ THE ABOVE INFORMATION AND AGREE TO ALL TERMS REGARDING INSPECTIONS AND CERTIFICATES. I FURTHER AGREE THAT IF I AM NOT THE OWNER OF THE PROPERTY TO BE INSPECTED, I HAVE BEEN AUTHORIZED BY THE OWNER(S) TO MAKE THIS APPLICATION AS THEIR AUTHORIZED AGENT AND AGREE TO THE TERMS.**

\_\_\_\_\_  
Signature of Applicant

# Sewer Lateral Inspection Affidavit

PERKIOMEN TOWNSHIP

PERKIOMEN TOWNSHIP MUNICIPAL AUTHORITY

Please Type or Print Clearly the required information below:

Property Address: \_\_\_\_\_

Property Owner(s): \_\_\_\_\_

Plumbing Company: \_\_\_\_\_

Company Phone Number: \_\_\_\_\_

Plumber's Name: \_\_\_\_\_

Date of Inspection: \_\_\_\_\_

I HEARBY CERTIFY THAT THE PROPERTY LISTED ABOVE HAS HAD THE SEWER LATERAL CAMERA INSPECTED FROM THE HOUSE/BUILDING TO THE SEWER MAIN AND THAT THE SEWER LATERAL IS FREE OF PLUMBING DEFICIENCIES SUCH AS; BACK PITCH, BREAKS, CRACKS, INFILTRATION, ILLEGAL CONNECTIONS, OBSTRUCTIONS, ROOTS, OR GREASE BUILDUP TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BELIEF.

I UNDERSTAND THAT FALSE STATEMENTS HEREIN ARE MADE SUBJECT TO THE PENALTIES OF 18 PA. C.S. SECTION 4904, RELATING TO UNSWORN FALSIFICATION TO AUTHORITIES.

**\*\*\*A SCALED OR DIMENSIONED DRAWING OF THE SEWER LATERAL FROM THE BUILDING TO THE SEWER MAIN IS REQUIRED ON THE REVERSE SIDE.**

\_\_\_\_\_

Signature of Plumber

\_\_\_\_\_

Date

**PLEASE PROVIDE A SCALED OR DIMENSIONED DRAWING OF THE SEWER LATERAL FROM THE BUILDING TO THE SEWER MAIN BELOW. INCLUDE IN THE SKETCH, THE SIZE AND TYPE OF PIPE, PLUS THE LOCATION OF ANY CLEANOUTS, TRAPS, AND BENDS ENCOUNTERED.**

