



**DUBLIN BOROUGH**

119 Maple Avenue,  
Dublin PA 18917  
Phone: (215) 249-3310  
[www.dublinborough.org](http://www.dublinborough.org)

<b>OFFICIAL USE ONLY</b>	
Date Rec.:	_____
App Fee Paid:	_____
Check #:	_____ Receipt #: _____

**ZONING COMMERCIAL USE AND OCCUPANY APPLICATION**

*Required to be issued at time of resale or change in occupancy of a leased and/or rented commercial property*

Zoning Permit # \_\_\_\_\_

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**APPLICATION INFORMATION**

TMP# 10- \_\_\_\_\_

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

Site Address: \_\_\_\_\_

Zoning District (Circle One):

R-1	R-2	TC-1	TC-2	IP	IND	PVD
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**NEW / RE-OCCUPANCY OF A COMMERCIAL PROPERTY**

Date of Occupancy: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Name of Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

**ACKNOWLEDGEMENT**

I hereby acknowledge that I have read the application. That the information given is correct and that I am the owner or the duly authorized agent of the owner. I agree to comply with the Borough and State Laws regulating construction.

Applicants Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## REQUIRED OCCUPANCY INSPECTION

The owner/agent shall contact Boucher & James at #215-345-9400 at least 72 hours in advance to schedule their occupancy inspection. Please plan accordingly to make sure you are in compliance with the checklist below to avoid the need for re-inspection.

TO BE COMPLETED BY BOROUGH OFFICIAL		
Zoning Permit #: _____		
Address of Property: _____		
Date of Inspection: _____	Passed _____	Failed _____
Date of Re-Inspection: _____	Passed _____	Failed _____
Use of Property: _____	Conforming _____	Non-Conforming _____
Yes [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ]	<b>Smoke Detectors</b> are installed and operating on every story including basement.	
Yes [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ]	<b>Locks</b> on means of egress doors are readily able to be opened from the inside without need for keys, special knowledge, or effort.	
Yes [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ]	Every <b>window, door</b> and <b>frame</b> is in sound condition, good repair and weather tight.	
Yes [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ]	The <b>fire resistance rating</b> of floors, walls, ceilings, and other elements and components including fire doors and smoke barriers are maintained.	
Yes [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ]	All <b>exterior</b> sidewalks, walkways, stairs, driveways, parking spaces and similar areas are in a proper state of repair.	
Yes [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ]	All interior <b>stairs</b> and <b>railings</b> are maintained in sound condition and good repair.	
Yes [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ]	Every exterior and interior flight of stairs having more than four (4) risers, and every open portion of a stair, landing or balcony more than 30 inches above the grade or floor has <b>handrails</b> and/or <b>guards</b> (maximum four inch (4") opening between balusters).	
Yes [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ]	The <b>electrical system</b> including service, fusing, circuit breakers, outlets, and wiring has no visible or obvious defects which constitute a hazard to the occupant(s). Working <b>exhaust fan</b> in bathroom, not having an operable window.	
Yes [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ]	If a <b>sump pump</b> is present, it has been properly installed and maintained in a safe and approved manner (shall not be connected to public sewer).	
Yes [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ]	<b>Temperature/pressure relief valve</b> for hot water heater has <b>discharge pipe</b> properly installed (extends no more than six inches (6") off floor without any reduction in pipe diameter).	
Yes [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ]	<b>Street Address</b> must be legible and displayed in at least three inches height characters and shall be of such color and material as to be visible from the street, Per Ordinance 263.	
Yes [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ]	<b>Emergency Lights/Illuminated Exit Signs</b> the means of egress, including the exit discharge shall be illuminated at all times.	

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

Inspected By: \_\_\_\_\_

Date: \_\_\_\_\_

Re-Inspected By: \_\_\_\_\_

Date: \_\_\_\_\_