

Borough of McKees Rocks
ZONING CERTIFICATE or OCCUPANCY PERMIT

Zoning certificates and Occupancy permits per Borough Ordinance No.1330 section 7.200. A zoning certificate shall be obtained before any person may:

1. Erect, alter or convert any structure, building or part thereof, nor alter the use of any land prior to a zoning permit being approved or an Certificate of Occupancy Issued.
2. Applications for a zoning certificate shall be accompanied by a plot plan showing clearly and completely the location, dimension and nature of and structure involved and such other information as the Zoning Officer may require for the administration of this chapter, together with a filing fee in accordance with a schedule affixed by resolution of the Board.
3. Applications for an Occupancy shall include a floor plan layout showing all items on the interior of the building.

The following is to be completed by the Buyer/Proposed Landowner/Permit Applicant:

Date of Application _____

Name _____

Parcel number _____

Address of Property _____

Applicants mailing address _____

Email address _____ Phone _____

Will Applicant be occupying home? Yes _____ No _____

If no, who will? _____

What is current use of property? Single-Family Dwelling [] Vacant Land [] Other [] _____

What is the proposed use of property: _____

What was the prior use of the property: _____

Do your planned activities constitute a Home Occupation, business and/or require a license?

Yes _____ No _____

If Yes, please provide details and copy of license. _____

Under penalty of law, I/we certify that the above information is true and correct.

Signature

Printed

NOTICE! This Certificate does not pertain to Building Code Compliance

* Borough Use Only *

Zoning District _____

[] The stated occupancy is in accordance with the provisions of the Zoning Ordinance.

[] The stated occupancy is not in accordance with the provisions of the Zoning Ordinance.

Reason: _____

Signature, Zoning Officer

Certificate No.

RESIDENTIAL FEE \$55.00

COMMERCIAL FEE \$104.00

Date Paid: _____

Check # _____ M.O. _____

Additional documents may be attached as needed.