

Trappe Borough, Montgomery County, PA

525 West Main Street Trappe, PA 19426
Phone: 610.489.7181 Fax: 610.489.8827
Website: www.trappeborough.com



Non-Residential/Commercial or Commercial Tenant Change U & O Application

- The Use & Occupancy fee pays for an initial inspection and one (1) follow-up inspection, if necessary. Additional fees will be charged for all subsequent inspections. Fee schedule is available on our website. Permit fees are not refundable.
- PLEASE REVIEW THE INSPECTION CHECKLIST LOCATED ON OUR WEBSITE
- If this application is for the "SALE OF A PROPERTY" a Sewer Inspection is required. Applicant must contact the **Collegeville-Trappe Municipal Authority at 610-489-2831** to schedule this inspection and pay the fee. Trappe Borough cannot issue a "Use & Occupancy Certificate" without verification from CTMA that this inspection passed.

Use & Occupancy Ordinance is available on our website trappeborough.com or <https://ecode360.com/32571471>

PROPERTY ADDRESS: _____

***APPLICANT:** Realtor Property Owner Tenant Contractor

PROPERTY OWNER: _____

Address: _____

Phone & Email: _____

REALTOR: _____

Address: _____

Phone & Email: _____

BUYER OR TENANT: _____

Address: _____

Phone & Email: _____

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Please Note: Building alterations may require additional permits.

Address of Property _____

Owner of Record _____ **Phone** _____

Address of Owner _____

Buyer/Lessee _____ **Phone** _____

Address of Buyer/Lessee _____

Square foot of building/space intended for use _____

Intended Use (additional information may be required for a change in use) _____

Is the intended use a change from the previous use? If so, state previous use _____

Number of Employees Anticipated: _____, **Number of Current Parking Spaces** _____

Anticipated Hours and Days of Operations: _____

Current Tenant(s) _____
(if property is being sold but tenant remains)

Dates of Intended Occupancy _____

Signature of Owner _____

Signature of Lessee: _____

Date Approved: _____ **Zoning Official:** _____

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FOR BOROUGH USE ONLY:

APPLICABLE FEES:

* Permit Fee: _____

PAYMENT INFO:

Date: _____

Amount paid: _____

Payment type: Check # _____ Cash _____

Verified: _____

PARCEL ID #: 23-00-_____

BLOCK: _____

UNIT: _____

ZONING DISTRICT: _____

LICENSE # ASSIGNED: _____

Building Code Inspector