

10/19/11

HAZLE TOWNSHIP ZONING  
PO BOX 506, HARLEIGH, PA. 18225 570-455-2030

CERTIFICATE OF ZONING COMPLIANCE  
BUSINESS OCCUPANCY PERMIT

PERMIT NUMBER: B-\_\_\_\_\_ APPLICATION DATE:\_\_\_\_\_ OCCUPANCY DATE \_\_\_\_\_

BUILDING PERMIT NO..\_\_\_\_\_ IBC Ed. \_\_\_\_\_ FINAL INSPECTION DATE \_\_\_\_\_

TYPE OF CONST \_\_\_\_\_ OCCUPANCY /USE \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_

PROPERTY (Street) ADDRESS: \_\_\_\_\_

MAILING ADDRESS (If Different): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE NUMBER: Business: \_\_\_\_\_ Home: \_\_\_\_\_ Fax: \_\_\_\_\_

PARENT COMPANY OR OWNER: \_\_\_\_\_

COMPLETE ADDRESS: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE NUMBER: BUSINESS \_\_\_\_\_ FAX: \_\_\_\_\_

IS PROPERTY SERVICED BY: \_\_\_\_\_ SEPTIC SYSTEM? \_\_\_\_\_ PUBLIC SEWER?

GARBAGE HAULER: \_\_\_\_\_

WILL YOU BE: \_\_\_\_\_ RENTING? \_\_\_\_\_ OWNING?

OWNER'S NAME: (If Renting:) \_\_\_\_\_

COMPLETE ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE: BUSINESS \_\_\_\_\_ HOME \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

\*\*\*\*\*This is to certify that the applicant named had applied for and received a business occupancy for Hazle Township.\*\*\*\*\*

DEPT. USE ONLY

ONLY

DEPT. USE

STIPULATIONS/CONDITIONS/VARIANCES: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

OVER →

10/19/11

BUSINESS OR INDUSTRIAL:

Structure or Use: EXISTING \$125.00 NEW: \$225.00 prior to occupancy.  
\$325.00 after occupancy date or within 30 days of occupancy.  
\$550.00 after 30 days of occupancy.

PERMIT FEE: \$ \_\_\_\_\_ CASH \_\_\_\_\_ CHECK/M.O. \_\_\_\_\_ DATE : \_\_\_\_\_

\_\_\_\_\_  
BUILDING CODE OFFICIAL OR DESIGNEE

DEPARTMENTS NOTIFIED

\_\_\_\_\_ BERKHEIMER AGENCY  
\_\_\_\_\_ TAX COLLECTOR  
\_\_\_\_\_ HAZLETON CITY AUTH.(WATER DEPT)  
\_\_\_\_\_ AQUA PA

\_\_\_\_\_ MUNICIPAL AUTHORITY  
\_\_\_\_\_ FIRE COMPANY  
\_\_\_\_\_ GHJSA  
\_\_\_\_\_ EAGLE ROCK