

# Keycodes Inspection Agency

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## 2021 Plainfield Township - Certificate of Occupancy Request Form

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

Owner(s) Name: \_\_\_\_\_

Owner(s) Address: \_\_\_\_\_

Owner(s) Phone Number: \_\_\_\_\_ Cell \_\_\_\_\_ Other \_\_\_\_\_

Lessee(s) Name: \_\_\_\_\_

Lessee(s) Address: \_\_\_\_\_

Lessee(s) Phone Number: \_\_\_\_\_ Cell \_\_\_\_\_ Other \_\_\_\_\_

Current Use and Business Name: \_\_\_\_\_

Proposed Use and Business Name: \_\_\_\_\_

**Lessee(s) with signed contract/agreement must be onsite for inspections, no exceptions.**

Date of opening: \_\_\_\_\_ Requested Date of Inspection: \_\_\_\_\_

Contact Name & #: \_\_\_\_\_ Proposed Occupant Load: \_\_\_\_\_

Days of Operation	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Hours of Operation:	___ am	___ am	___ am	___ am	___ am	___ am	___ am
	___ pm	___ pm	___ pm	___ pm	___ pm	___ pm	___ pm

Type of Signs for Display and or Advertising

Quantity: \_\_\_ Wall \_\_\_ Window \_\_\_ Roof \_\_\_ Ground \_\_\_ Other (describe) \_\_\_\_\_

Size: \_\_\_ x \_\_\_ New or Existing (use additional sheet if necessary)

**COMMERCIAL FEES: List square footage of building to be inspected** \_\_\_\_\_

\$157.50 for first 1000 sq. ft. or less (single site visit only) \_\_\_\_\_

\$26.25 for each additional 1 - 500 sq. ft. \_\_\_\_\_

Certificate of Occupancy.....\$26.25 Ea. \_\_\_\_\_

Check# \_\_\_\_\_ Cash \_\_\_\_\_ Total Amount Received: \$ \_\_\_\_\_

Payment Received by: \_\_\_\_\_

Name of Applicant (Clearly Print): \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_