

Name of Tenant or Owner:

Pennsylvania and the United States.

Midway Borough 99 St. John Street, Upper Level

PO Box 574

Midway, PA 15060

724-796-8700 724-796-5694 midboro@comcast.net midwayborough.org

Occupancy Application

\$25 Fee

Any permit issued pursuant to the approval of this application may be revoked if the issuance was based upon incomplete or inaccurate information, or it violates any Midway Borough Ordinance, Pennsylvania Statute, United States Law or Court.

| Property Address: | | |
|---|---|-----------------------------|
| Mailing Address: (P.O. Box #) | | |
| Phone Number: | | |
| Date of Occupancy: | | |
| Employer Name (if known): | | |
| List name(s) of all other occul If more, please list on reverse side of ap | pants below. State if employed, not employ plication. | ed, student, retired, etc.: |
| Name: | Employer (if | known): |
| Name: | Employer (if | known): |
| Name | Employer (if | known): |
| Name | Employer (if | known): |
| Signature of owner or tenant | : | Date: |

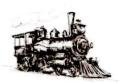
The applicant agrees that if a permit is issued, the permit may be revoked by administrative action of the Borough of Midway if compliance with the foregoing paragraphs are not absolute.

This applicant certifies that the above information is complete and true to the best of the applicant's knowledge and belief. The applicant agrees to comply with the provisions of the Borough of Midway's Ordinances, Codes and

Regulations, and all other applicable laws and regulations of Washington County, Commonwealth of

BOROUGH OF MIDWAY

P.O. BOX 574
99 ST. JOHN STREET, UPPER LEVEL, SUITE 1
MIDWAY, PA 15060
724-796-8700 / 724-796-5694 (fax) / midboro@comcast.net



Occupancy Application Acknowledgement

(To be completed by Buyer)

| This is to notify you that you have received an application for an Occu | pancy Permit |
|---|-------------------|
| for property located at | . No one is to |
| reside at this address for any amount of time until such Occupancy Pe | rmit or any other |
| permits required are issued. | |
| | |
| I understand the law as explained above. | |
| | |
| Printed Name Date | |
| Signature | |