

\$50.00 APPLICATION FEE
NON-REFUNDABLE

PHONE: 412-781-0546
FAX: 412-781-0449

APPLICATION FOR USAGE PERMIT
BOROUGH OF SHARPSBURG
1611 MAIN STREET
PITTSBURGH, PA 15215

DATE: _____

NAME OF BUSINESS: _____

ADDRESS OF BUSINESS: _____

BUSINESS PHONE NUMBER: _____

NATURE OF BUSINESS: _____

NUMBER OF EMPLOYEES: _____ HOURS OF OPERATION: _____

NO. OF VEHICLES FOR: _____ NO. OF ON SITE PARKING SPACES: _____

NAME OF BUSINESS OWNER: _____

PERSONAL ADDRESS: _____

SIGNATURE OF BUSINESS OWNER: _____

EMERGENCY CONTACT
PERSON AND PHONE #'S 1. _____

**TWO REQUIRED
2. _____

NAME OF PROPERTY OWNER: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

SIGNATURE OF PROPERTY OWNER: _____

BEFORE A USAGE PERMIT MAY BE ISSUED, THE ABOVE INFORMATION MUST BE ENTERED COMPLETELY. THIS APPLICATION THEN IS REFERRED TO THE ZONING OFFICER FOR HIS INSPECTION AND APPROVAL. FINAL DECISION OF THIS APPLICATION MUST BE GIVEN BY COUNCIL AT THE SCHEDULED REGULAR BUSINESS MONTHLY MEETING OF THE SHARPSBURG BOROUGH COUNCIL, WHICH IS HELD ON THE FIRST TUESDAY OF THE MONTH ALONG WITH AN INSPECTION OF PROPERTY.

**** THE APPLICANT MUST BE PRESENT ** **INSPECTION REQUIRED BY BUILDING INSPECTOR**

FOR BOROUGH USE ONLY

ZONING/PARKING:

APPROVED: _____

DISAPPROVED: _____

CODE COMPLIANCE INTERIOR/EXTERIOR INSPECTION:

APPROVED: _____

DISAPPROVED: _____

REMARKS: _____

DATE: _____

ZONING OFFICER: _____