



**SOUTH FAYETTE**  
**T O W N S H I P**  
 A Community Growing Together

**Business/Commercial**  
**Zoning Occupancy & Use Permit**  
 515 Millers Run Road / Morgan, PA 15064  
 Ph: 412-221-8700 Fx: 412-221-7798  
 www.SouthFayettePA.com

Please print clearly and return with the required fee of **\$150.00**

Owner of Building: \_\_\_\_\_

Owner's Address: \_\_\_\_\_

Address of Building (if different): \_\_\_\_\_

Type of Business: \_\_\_\_\_

Emergency Contact for Business: \_\_\_\_\_

Back-Up Emergency Contact: \_\_\_\_\_

OCCUPANTS: Below, list names of all employees.

1. Employee Name \_\_\_\_\_

2. Employee Name \_\_\_\_\_

3. Employee Name \_\_\_\_\_

4. Employee Name \_\_\_\_\_

5. Employee Name \_\_\_\_\_

6. Employee Name \_\_\_\_\_

**IF MORE, PLEASE LIST ON REVERSE SIDE OF THIS APPLICATION**

*I acknowledge that typing or entering my name in the "signature" area below constitutes my electronic signature and has the same force and effect as my handwritten signature.*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of Owner

Date of Application

Date of Occupancy/Closing

**OFFICE USE ONLY**

Approved/Rejected: \_\_\_\_\_ 20\_\_\_\_\_

Inspected by: \_\_\_\_\_

Conditions: \_\_\_\_\_

\_\_\_\_\_

Fee Paid: \_\_\_\_\_

Check #: \_\_\_\_\_

*If a no-lien letter also is being requested, an additional \$30 fee is required.*