

**PAINT TOWNSHIP**  
1741 Basin Drive, Windber, PA 15963  
Phone: 814 467-9788 • Fax: 814 467-6679

**APPLICATION for CERTIFICATE of USE and OCCUPANCY**

(Please print or type all requested information clearly)

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

Property Owners: \_\_\_\_\_  
(List corporation/entity name and address, if applicable)

Owner Telephone & Contact Person: \_\_\_\_\_

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

Local Contact (if applicable): \_\_\_\_\_ Phone: \_\_\_\_\_

Local Address: \_\_\_\_\_  
\_\_\_\_\_

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Description of Proposed Use: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Type of Use:  
(check appropriate block)

- |   |  |
|---|--|
| <input type="checkbox"/> New Single-Family Dwelling | <input type="checkbox"/> New Two-Family Dwelling                         |
| <input type="checkbox"/> New Commercial Building    | <input type="checkbox"/> Occupancy of Existing Commercial Space/Building |
| <input type="checkbox"/> Swimming Pool              | <input type="checkbox"/> Home Occupation                                 |
| <input type="checkbox"/> Other _____                |  |

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(For Township Use – Do Not Write Below Line)

Date Received: \_\_\_\_\_ Fee Received: \_\_\_\_\_ Cash \_\_\_\_\_ Check \_\_\_\_\_ No. \_\_\_\_\_

Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ Date: \_\_\_\_\_

Building Codes Official: \_\_\_\_\_

Reason for denial, if applicable: \_\_\_\_\_

Additional comments: \_\_\_\_\_