



SOUTH FAYETTE T O W N S H I P

A Community Growing Together

Business/Commercial

Zoning Occupancy & Use Permit

Phone: 412-221-8700 Fax: 412-221-7798

www.SouthFayettePA.com

Please print clearly and return with the required fee of **\$150.00** (check payable to South Fayette Township) to:
South Fayette Township / 100 Township Drive / Second Floor / South Fayette, PA 15017

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 also 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.