

# BOROUGH OF HELLERTOWN

685 Main St., Hellertown PA 18055  
Phone: 610-838-7041 Fax: 610-838-0500  
www.hellertownborough.org

## Certificate of Compliance Application

**PLEASE PRINT LEGIBLY AND FILL OUT FORM COMPLETELY**

**Date:** \_\_\_\_\_ **Commercial:** \_\_\_\_\_ **Residential:** \_\_\_\_\_

**Business Name or Property Address:** \_\_\_\_\_

**Street:** \_\_\_\_\_ **City:** Hellertown Borough **State:** PA **ZIP:** 18055

**Business Web site:** \_\_\_\_\_

**Business E-mail:** \_\_\_\_\_

**Business Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Property Owner Name:** \_\_\_\_\_

**Street:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Type of Certificate Requested:** **Temporary** **Full**

**Requested Use and Occupancy:** \_\_\_\_\_

When this information is received, the permit will be prepared by the codes office. You will also be contacted by the codes office if your application requires any additional information, inspections or supporting documents.

I HEREBY ACKNOWLEDGE, THAT I HAVE READ THIS APPLICATION, THAT THE INFORMATION GIVEN IS CORRECT, AND THAT I AM THE OWNER OR DULY AUTHORIZED TO ACT ON THE OWNER'S BEHALF.

**Applicant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

### FOR OFFICIAL USE ONLY

#### PAYMENT INFORMATION

**Fee =** \_\_\_\_\_

#### PAYMENT TYPE

CASH  
CHECK # \_\_\_\_\_  
CREDIT CARD

**Received by:** \_\_\_\_\_