

**PORTVUE BOROUGH**  
**APPLICATION FOR RESIDENTIAL/COMMERCIAL OCCUPANCY**

PROPERTY ADDRESS TO BE INSPECTED: \_\_\_\_\_

RESIDENTIAL  COMMERCIAL

SINGLE FAMILY  DUPLEX  COMMERCIAL LEASED

IF COMMERCIAL, BUSINESS NAME: \_\_\_\_\_

OWNER OF PROPERTY NAME: \_\_\_\_\_

OWNER ADDRESS (IF NOT SAME AS ABOVE)

OWNER OR AGENT (CONTACT PERSON TO CALL AND SCHEDULE INSPECTION)

NAME: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

I WOULD LIKE MY INSPECTION REPORTS/CERTIFICATES MAILED  EMAILED

**FEES:**

\$150.00 FOR EACH DWELLING UNIT AND \$175.00 PER COMMERCIAL TENANT \$50.00 FOR THIRD INSPECTION IF SECOND INSPECTION FAILS.

MAKE CHECKS PAYABLE TO: **BOROUGH OF PORT VUE**

MAIL APPLICATION AND CHECK TO: **BOROUGH OF PORT VUE 1191 ROMINE AVENUE**  
**PORT VUE, PA 15133**

**INSPECTOR: NICK RUFFNER EMAIL: [NICKR@GLENNENGR.COM](mailto:NICKR@GLENNENGR.COM)**

QUESTIONS, REINSPECTIONS CALL: 412-824-5672 x113 AND LEAVE MESSAGE IF NECESSARY.

FOR INTERNAL USE ONLY

LOT/BLOCK# _____	PAYMENT RECEIVED _____
DATE APPLICATION RECEIVED _____	DATE AGENT CONTACTED _____
DATE OF INITIAL INSPECTION _____	PASS      FAIL
RESIDENTIAL OCCUPANCY CERTIFICATE NUMBER _____	DATE ISSUED _____
COMMERCIAL OCCUPANCY CERTIFICATE NUMBER _____	DATE ISSUED _____