

# CENTRAL KEYSTONE COUNCIL OF GOVERNMENTS

1610 Industrial Boulevard, Suite 400A

Lewisburg, PA 17837

## Code Compliance Record Request Form

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

Requestor: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Requestors Address: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_ Fax: \_\_\_\_\_

Return Method: Pick up  Fax  E-Mail  Mail

Municipality: \_\_\_\_\_

Physical Address of Property: \_\_\_\_\_

\_\_\_\_\_

Parcel Identification Number: \_\_\_\_\_

Last Known Property Owner: \_\_\_\_\_

.....

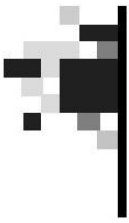
### **Active/Open Permits or Code Violations** *(If any "YES" answers please complete second page)*

**UCC Building Permit or Violation**  No  Yes  
completed by \_\_\_\_\_ Title/Dept. \_\_\_\_\_

**Zoning Permit or Violation**  No  Yes  
completed by \_\_\_\_\_ Title/Dept. \_\_\_\_\_

**Property Maintenance Violation**  No  Yes  
completed by \_\_\_\_\_ Title/Dept. \_\_\_\_\_

(over)



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## Code Compliance Request Form (PAGE 2)

UCC Building Permit# \_\_\_\_\_

Violation: \_\_\_\_\_

Are Supporting Records available\*?  No  Yes (# of pages \_\_\_\_\_)

Are any Fees or fines outstanding?  No  Yes

If Yes, amount: \$ \_\_\_\_\_ Payable to: \_\_\_\_\_

Zoning Permit# \_\_\_\_\_

Violation: \_\_\_\_\_

Are Supporting Records available\*?  No  Yes (# of pages \_\_\_\_\_)

Are any Fees or fines outstanding?  No  Yes

If Yes, amount: \$ \_\_\_\_\_ Payable to: \_\_\_\_\_

Property Maintenance Violation# \_\_\_\_\_

Violation: \_\_\_\_\_

Are Supporting Records available\*?  No  Yes (# of pages \_\_\_\_\_)

Are any Fees or fines outstanding?  No  Yes

If Yes, amount: \$ \_\_\_\_\_ Payable to: \_\_\_\_\_

**\*If records are available, an Open Records Request may be required for their release. If the ORR is required it will be forwarded to you with this completed form.**

Return Method: Pick up  Fax  E-Mail  Mail

Fees: Copies \$ \_\_\_\_\_ Postage: \$ \_\_\_\_\_ Paid by: \_\_\_\_\_

Date Form Returned: \_\_\_\_\_ Staff Initials: \_\_\_\_\_