CITY OF COATESVILLE PENNSYLVANIA



CODES DEPARTMENT
1 City Hall Place, Coatesville, PA 19320 (610) 384-0300 Option 3 (610) 384-6051 (Fax)

APPLICATION FOR RENTAL UNIT INSPECTION

ADDRESS TO BE INSPECTED:	PARCEL NUMBER:	
TOTAL NUMBER OF UNITS AT ADDRESS:	UNIT NUMBER TO BE INSPECTED:	
APPLICANT NAME:	APPLICANT EMAIL ADDRESS:	
APPLICANT PHONE NUMBER (indicate if Mobile/Home/Work):		
OWNER NAME:		
OWNER PHONE NUMBER:		
OWNER ADDRESS:	OWNER EMAIL ADDRESS:	
FOR ANY ADDITIONAL INSE INSPECTION FEE - \$80.00 P AND CITATION PENALTY FEE - \$500.00 ANI PAYMENTS MUST BE RECE A RENTAL INSPECTION WIL LICENSE AND/OR TAXES AI THE CURRENT OWNER OR (TENANTS ARE NOT ACCEP INSPECTION A NO SHOW OR FAILURE TO	D SUMMARY CITATION EIVED PRIOR TO SCHEDULING AN INSPECTION LL NOT BE SCHEDULED IF THE RENTAL RE NOT CURRENT FOR SAID PROPERTY DESIGNATED AGENT ELECTED BY OWNER PTABLE) MUST BE PRESENT AT TIME OF	
AT LEAST 24 HOURS PRIOF INSPECTION	R WILL COUNT AS A FAILED	
	ES THAT I HAVE READ AND UNDERSTAND THE CONDITIONS:	
Rental License No: Inspection Type: Initial: Tenant Change: Biennial:		



TENANT REGISTRATION FORM

(PLEASE PRINT CLEARLY. If additional space is needed, please make a copy.)

Address: Tenant information for each tenant in the unit/property		
Tenant Name:		Unit Number:
Adult or Minor (please circl	le) Lease Dates:	
Phone Number:		
Tenant Name:		Unit Number:
Adult or Minor (please circl	le) Lease Dates:	
Phone Number:		
Tenant Name:		Unit Number:
Adult or Minor (please circl		·
Phone Number:		
Tenant Name:		Unit Number:
Adult or Minor (please circl	le) Lease Dates:	5
Phone Number:		
Tenant Name:		Unit Number:
Adult or Minor (please circl	le) Lease Dates:	5
Phone Number:		
Tenant Name:		Unit Number:
Adult or Minor (please circl	le) Lease Dates:	·
Phone Number:		
Tenant Name:		Unit Number:
Adult or Minor (please circl		
Phone Number:		