

**APPLICATION FOR
USE AND OCCUPANCY PERMIT**

BOROUGH OF EBENSBURG

Name of Applicant _____

Mailing Address _____

Telephone Number _____

Location Of Property _____

Proposed Use _____

Check Appropriate Item(s):

_____ **New Construction**

_____ **Alteration**

_____ **Addition**

_____ **Change In Use**

_____ **Change In Non-Conforming Use**

_____ **Home Occupancy Business**

_____ **Change In Occupancy, Non-Residential**

Name of Applicant

Signature of Applicant

Date

Borough of Ebensburg
300 West High Street
Ebensburg, Pennsylvania 15931
814-472-8780
814-472-8789 (fax)
eburg@ebensburgpa.com

IMPORTANT – SEE REVERSE