



MIDDLE SMITHFIELD TOWNSHIP
147 MUNICIPAL DRIVE
EAST STROUDSBURG, PA 18302
570-223-8920 FAX: 570-445-3720

RESALE/OCCUPANCY CERTIFICATE
REQUEST FOR RE-INSPECTION

ALL SECTIONS OF THIS APPLICATION MUST BE COMPLETED

1. Property Address: _____
2. Property Identification Number (PIN): 0 9 7 3 _____
3. Certificate Permit Number: _____

REQUESTED BY:

4. Name: _____

Seller/Owner Agent Buyer

Mailing Address: _____

Phone Number: _____

Email: _____

*We will email the certificate to this email address

5. Is property vacant? _____

6. Is water on? _____ Is electricity on? _____

*If water and/or electricity is *not* turned on, applicant will receive Temporary Access Certificate only and will require re-inspection once water and electricity is turned on. Re-inspection is \$50

7. Is property within a gated community? _____ If yes, provide access code: _____

Applicant hereby authorizes members of Township Boards, staff and representatives to enter the lands proposed for site inspections.

I hereby certify that I have been authorized by the owner to make this application as his/her authorized agent and we agree to conform to all applicable laws of this jurisdiction.

Signature of Requester: _____

Date: _____