



CODE ENFORCEMENT AGENCY
1633 Route 51, Suite 100, Jefferson Hills, PA 15025
1-866-410-4952 www.cea-code.com

RETURN TO GLASSPORT BOROUGH

2026 RENTAL & REAL ESTATE TRANSFER APPLICATION

RESIDENTIAL (single family, Duplex) / COMMERCIAL

Date of Application: _____

CURRENT OCCUPANT & LOCATION INFORMATION:

Occupant Name: _____

Address: _____

Suite # _____

City: Glassport Zip Code: 15045 Email: _____

Contact # () _____

Lot Block # / Tax Map #: _____ Owner / Rental / Lease _____

NEW OCCUPANT / OWNER (Name on New Placard)

Name: _____

Contact Name: _____

Address: _____ City / Zip Code: _____

Phone# () _____ Email: _____

TRANSFER INFORMATION:

RENTAL

SALE OF PROPERTY

LEASE / (sub lease)

PROPOSED TRANSFER DATE: _____

BUILDING INFORMATION:

Vacant / Occupied Vacant Date: _____

Is the Building used for any other purpose? _____

Change in Use in Occupancy? _____

Where is / As is point of Transfer? _____ Do you have a notarized affidavit? _____

Are the Utilities connected? Electric _____ Gas _____ Water _____ Sewer _____ Other: _____

Smoke / Carbon Monoxide Detectors in proper areas? _____ Fire / Panic _____

Fire Extinguisher been Tested & Tagged? (if applicable) _____

Emergency Lights (if applicable) working? _____

Main Electric Panel been inspected? _____ 4" (min) address sign on building? _____

Any known or open violations? _____

Any known or open issues: _____

PLEASE READ before Signing:

Please note, the Building Code Official, Code Enforcement Officer, as well as any inspector or plans examiner, are not authorized to offer design advice or assist in qualifying repair details in relation to this application.

Any changes in this application submitted during application, must be properly communicated and approved by the Building Code Official or Code Enforcement Officer prior to implemented such changes.

All local Zoning Ordinances and other local ordinances apply to this application as deemed by the jurisdiction.

THIS APPLICATION IS A LEGAL DOCUMENT: Any changes or additional information recorded on this application must be made by the applicant, agent or responsible party that signed the application. All requested areas of information within this application shall be completed and legible before acceptance of the application at the Building Department.

Signature of the Applicant (legible)

Date



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REAL ESTATE TRANSFER INSPECTION AFFIDAVIT

Based upon the local Ordinance established by the jurisdiction named below, this affidavit is signed and notarized as a "where is / as is" point of sale and transaction. The current status and inspection of the property designated below has determined it does not meet or exceed the minimum code requirement for occupancy according to the Commonwealth of Pennsylvania Uniform Construction Code. The Buyer and Jurisdiction recognize that the Buyer is required to comply with all local codes and standards as described in the International Property Maintenance Code (IPMC), the International Building Code (IBC), National Electrical Code (NEC) and the Commonwealth of Pennsylvania Uniform Construction Code (PA UCC) prior to receiving an Occupancy Permit.

The Buyer understands and agrees that neither this inspection agency, nor the Jurisdiction have made or shall make any assumptions, corrections or changes to any language specifically to the word "Occupancy" until such time as all required codes specified above have been satisfied to the minimum standard.

UPON CLOSING ON THIS PROPERTY, THE NEW PROPERTY OWNER(S) OF RECORD NOTED HEREIN ACKNOWLEDGES AND ACCEPTS FULL RESPONSIBILITY FOR THE ABATEMENT OF ALL ACTIVE INTERIOR AND EXTERIOR PROPERTY MAINTENANCE AND/OR ZONING CODE VIOLATIONS ON THE PROPERTY ADDRESS OUTLINED HEREIN AND ENUMERATED ON THE ATTACHED NOTICE OF VIOLATION OR PROPERTY MAINTENANCE & TENANT REPORT. EXTERIOR PROPERTY MAINTENANCE VIOLATION WILL BE SUBJECT TO A TIME-LIMIT FOR ABATEMENT DETERMINED BY THE CODE OFFICIAL. IT WILL BE THE RESPONSIBILITY OF THE NEW OWNER(S) OF RECORD TO CONTACT THE CODE OFFICIAL AND REQUEST THEIR UPDATED NOTICE OF VIOLATION.

Address: _____ Lot & Block# _____

Signature of Buyer

Signature of Seller

Notary Seal

Date

Signature of Building Code Official

Jurisdiction



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2026 RESIDENTIAL / COMMERCIAL **OCCUPANCY CONDITIONAL USE PERMIT**

Property Name: _____

Address: _____

Lot / Block# _____ Jurisdiction: _____

Responsible Party Name on Conditional Permit: _____

Contact # () _____ Email: _____

A real estate transfer or rental inspection has been performed and conditionally approved for temporary occupancy purposes. This conditional use permit has deficiencies of the minimum code requirement necessary for a full occupancy to be approved.

The timeframe for completion of this conditional use permit is **60-days** from the date of this letter to either fully comply with the repairs necessary as described in the notarized affidavit or legally apply for an extension of time for additional work on file.

Further time may be granted in writing and approved only by the Building Code Official. Progress of repairs and completion must be progressive to apply for an extension.

Failure to comply with the **60-days** for full Certificate of Occupancy or legal extension shall result in a notice of violation, potential citations for each code violation as presented and suspension of the conditional occupancy permit.

**** Please NOTE: Any unsafe conditions or structures deemed appropriate by the Code Enforcement Officer or Building Code Official may result in an issuance of violation AND the immediate posting of an unsafe structure which shall prohibit any occupancy until such unsafe conditions are properly repaired and inspected by the jurisdiction.**

Signed by Buyer or Permit Holder

Building Code Official

Date

(Attach the Notarized Affidavit)