

Phone (570) 829-3439
Extension 4141

Fax (570) 208-2642
Plainszoning@gmail.com

TOWNSHIP OF PLAINS
ZONING/CODE ENFORCEMENT OFFICE
126 North Main Street
Plains, PA 18705

RENTAL ZONING COMPLIANCE APPLICATION # _____

**** PER UNIT COST: Residential \$50.00 Commercial \$100.00**

1. Address rental property _____

2. Owner Information: Name: _____ EMAIL: _____

Address: _____ Phone: _____

3. Printed Names of all persons (18 or older) who will reside at this address

4. Present Use of Structure: Residential or Commercial No. of housing units (if applicable) _____

5. Present Use of Land: Circle: Residential or Commercial. 5A. Will the Use of the Building/Land change? YES NO

6. If YES indicate proposed use _____ 7. Zoning District _____

The inspection is a minimum property maintenance inspection made exclusively for the use of the municipality in determining the premises' compliance with the Plains Township Zoning Ordinance. This permit confirms that the use of the property is in compliance with the zoning district. The inspection is limited to observations readily visible without moving or removing any item. Confined spaces, such as crawl spaces or attics are not inspected. Furnishings are not moved. Concealed, internal or hidden damage or defects will not be observed.

The heating, air conditioning and water heater systems are not inspected. It is the owners responsibility to ensure they are in safe, operable condition. The overall condition of the roof and roofing materials are visually inspected from the exterior at ground level. This list shows commonly found violations. It is NOT intended to be a comprehensive list of all code violations that could occur. Those items underlined below are the most common items requiring correction.....If you have questions about a specific situation, please call 570-829-3439 ext. 4141.

Every Owner who is not a full-time resident of the Township of Plains, or elsewhere in an area that is not within a twenty (20) mile radius of the Township of Plains, shall designate Manager who shall reside in an area that is within a twenty (20) mile radius of the Township of Plains.

The undersigned verifies that all statements on this application are true & correct. The undersigned further states that he understands any false statements made herein are subject to the penalties of 18 PA S.C. Section 4904, relating to unsworn falsification to authorities. Additionally it is understood that the Inspector, nor Township warranties or will be responsible for damages or injuries sustained in the inspected units.

MANAGER NAME: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

SIGNATURE OF OWNER OR MANAGER: _____

IF UNIT FAILS INSPECTION ADDITIONAL PER UNIT FEE: \$50 RESIDENTIAL - \$100 COMMERCIAL

COMPLETE CHECK LIST BEFORE SUBMITTING APPLICATION.

Pre-Inspection Checklist (2 pages) must be completed prior to inspection. If subsequent inspections are required, a fee of \$50.00 residential unit or \$100.00 commercial unit will be charged.

PROPERTY ADDRESS: _____

Checklist Completed By: _____

Fire Safety -

YES___ NO___ **Is there a working smoke detector in EACH bedroom (or other room used for sleeping if applicable), in the hallway(s) outside of the bedrooms and on each level, including the basement? (704.2)**

YES___ NO___ Hot water heater and furnace clear (at least 3 feet away) of boxes, flammable materials? (603.3)

YES___ NO___ Are all exits free from obstruction inside and outside (debris, shrubbery etc.)? (702)

YES___ NO___ Is there a hood over gas stove? (Does not need vent to exterior)

YES___ NO___ Carbon Monoxide Detector in vicinity of sleeping quarters

Doors & Windows –

YES___ NO___ Do all exterior doors open and close easily? Are they weather tight? (304.13, 304.15)

YES___ NO___ Doors lock and unlock from the inside without a key or special knowledge? (304.18.1& 702.3)

YES___ NO___ Windows open and stay open? (304.13.2)

YES___ NO___ Windows close and lock? Are they weather tight? (304.13.1, 304.18.2)

YES___ NO___ Any broken or cracked windows?

YES___ NO___ Screens in place and free from tears? (304.14)

Walls, Ceilings and Floor –

YES___ NO___ Walls, window sills and ceilings: clean and free from peeling paint or wallpaper? (305.3)2

YES___ NO___ Are the floors structurally sound? (305.4)

YES___ NO___ Is the flooring (carpet, vinyl, wood, etc.) clean and in good condition, i.e. thresholds in place, no rips or other tripping hazards, no missing tiles? (305.4)

YES___ NO___ Are there proper globes/diffusers/covers on all light fixtures? (605.1)

YES___ NO___ Are there light fixtures in all halls, stairways, laundry rooms and furnace rooms? (605.3)

YES___ NO___ Are handrails and other railings firmly attached with no loose or missing spindles? (305.5)

Heating, Plumbing & Electrical-

YES___ NO___ Is the Service a Federal Pacific Electric Service?

YES___ NO___ **Does the Hot Water Heater have a discharge pipe terminating between 2 & 6" from floor?**

YES___ NO___ GFCI on all receptacles within six feet of a water source, in the garage, on the exterior?

YES___ NO___ Covers on all junction boxes, receptacles and switches?

YES___ NO___ Is all fuel burning equipment in good repair and safe condition, properly installed and connected to chimneys or vents? (verified by owner, not inspector)

YES___ NO___ Is there a working exhaust fan or a window in each bathroom?

YES___ NO___ **Do all outlets, switches and panel boxes have covers? (605.1)**

YES___ NO___ Are there two outlets in each room and one in the bathroom? (605.2)

YES___ NO___ Do all taps run (hot & cold) and toilets flush? Is the plumbing properly vented? (505.1, 506.1)

YES___ NO___ Do any pipes leak or faucets drip? (504.1)

Exterior –

YES___ NO___ Does each unit have address numbers that are clearly visible from the street (at least 4" high)?

YES___ NO___ Is the yard maintained (grass under 6", no tall weeds)? (302.4)

YES___ NO___ Is all rubbish stored in appropriate containers and removed regularly? (308)

YES___ NO___ Is the exterior in good repair? Siding, brick or paint free of chips or deterioration? (304.2)

YES___ NO___ Is the roof in good repair with no leaks? No overhanging tree limbs or branches? (304.7)

YES___ NO___ Is the chimney in good repair and safe condition? (304.11)

YES___ NO___ Is the foundation in good repair, level with no cracking or deterioration? (304.5)

YES ___ NO ___ Are gutters and downspouts free of debris and directing water away from the structure? (304.7)

YES ___ NO ___ Are the premises free of infestation such as insects, rats and/or other vermin? (302.5)

Swimming Pool on property? YES ___ NO ___ If so, is it protected by a 48" (or 72" if in ground pool) barrier or fence in good repair, with a self latching, self-closing gate? (303) YES ___ NO ___

Recommended but not required in existing buildings –

YES ___ NO ___ Attached garages ½" drywall on garage side between house and garage and 1¾" solid core or fire rated door

ADDRESS OF UNIT: _____

Checklist Completed By: _____

_____**Owner/Manager (Circle One)**

Signature

Included in visual inspection:

Basic Equipment and Facilities Kitchen

sink not provided Lavatory basin not

provided Toilet not provided

Tub or shower not provided

Bathroom or toilet not properly enclosed

Hot and cold water not provided to kitchen sink, lavatory basin, tub or shower

Water heating facilities not provided

Light, Ventilation and Heating

Ventilation not adequate for bathroom (fan or window)

Two electrical outlets, or one outlet and one light fixture, not provided for each habitable room

Heating facilities inadequate or of unapproved type

Fire Sensor/Alarm

Porch defective

Outside steps defective

Exterior wall structurally weather tight

Exterior wall structurally unsafe

Roof not weather tight

Chimney in need of repairs

Exterior openings not weather tight

Exterior openings not in working condition

Foundation not watertight or rodent-proof Inside

stairs not safe

Handrails not provided on exterior nor interior stairs

Floors are defective

Joists are defective

Patch plastering needed

Lack of adequate fire escape

Plumbing fixture or pipes leaking or obstructed Plumbing fixture

or pipes not properly installed Plumbing fixtures not maintained

in sanitary conditions Bathroom or lavatory floor not impervious

Bathroom or lavatory floor not maintained in sanitary condition

Heating facilities not maintained in safe, working condition Drainage

system defective

Kitchen range defective

Defective wiring

Lighting fixtures broken, defective or improperly installed

Flexible cords used for branch wiring

Sockets, switches, or receptacles broken

Cover-plates broken or missing from switches, receptacles or outlet boxes Any

such requirements under the UCC or IMPC adapted by the Township

Range Hood for open flame gas stove/tops

Name of Inspector: _____

Approved Yes No BY: _____ Date _____

2ND Inspection Date: _____ Passed: Yes No 3RD Inspection Date: _____ Passed: Yes No