

West Brownsville Borough

238A Middle Street, West Brownsville, PA 15417

Tel: 724-785-2475

westbrownsvilleboro@yahoo.com

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westbrownsvilleborough

facebook.com/

Greetings:

Our records indicate that a rental license is due for: _____

Pursuant to the new rental ordinance, the cost of the license is \$75.00 per unit yearly. Please fill out the attached application in its entirety and return it with the license fee by **January 31st**. A separate application is required for each rental property.

Once the application is received and approved, a license certificate will be issued for each rental unit which must be displayed at the rental unit.

NOTE:

There is a new inspection process. The new inspection fee is \$150.00 pass or fail. The re-inspection fee is \$50.00 for each time if needed. **HOWEVER**, you are not required to have an inspection of the unit(s) unless: there is a new tenant moving in, there is a tenant complaint due to a safety or hazardous concern, or a complaint is made to the code enforcement officer about the structure. Please fill out the enclosed affidavit that must be notarized and returned with the application. The Borough Secretary is a notary and will do this if needed. You can call the borough office for her availability.

It is your responsibility to contact the code enforcement officer immediately with any changes to your rental unit(s). Failure to do so can result in a fine as set forth in the Rental Ordinance.

A copy of the new Rental Ordinance (No. 2023-361) can be obtained from the borough secretary.

Enclosed is:

Rental Application

Tenant List – must list ALL current tenants

Affidavit along with required notarized statement

Blank Rental Inspection Report (informational so you know what is required)

Please feel free to contact me with any questions or concerns

Edward “Eddie” Beck

Code Enforcement/Zoning Officer

West Brownsville Borough
724-562-0223
wbbcodeofficer@yahoo.com

BOROUGH OF WEST BROWNSVILLE
Phone: 724-785-2475

238A MIDDLE STREET
West Brownsville, PA 15417

APPLICATION FOR RENTAL LICENSE

License Number: _____
Assigned by Code Enforcement Officer

I, _____, hereby make application for a rental unit license for my property at

_____, _____, _____, _____
Property Address Municipality County Unit/Apt. Numbers

Number of tenants/persons/entities proposed to occupy the units for which application is made _____

Owner Information:

Name: _____

Address: _____

Business Address: _____

Home Phone: _____

Business Phone: _____

I further agree to required inspections of these rental units and certify that the foregoing is true and correct. If there is more than one owner, I also certify that I am authorized to submit this application.

Signed: _____

Date: _____

Printed: _____

Email: _____

Applicant must designate an agent for the receipt of service of violations of the provisions of the Rental Unit Ordinance and/or Building Codes and Zoning Ordinances and for service of process pursuant to the Ordinance.

NOTE: Owner/Agents **MUST** be within a 12 mile driving radius pursuant to the Rental Ordinance.

Agent Information:

Name: _____

Address: _____

Business Address: _____

Home Phone: _____

Business Phone: _____

I, _____ hereby agree to act as Managing Agent on behalf of:

_____, the owner of the premises located at: _____

In accordance with and to the extent set forth by the West Brownsville Borough Rental Ordinance.

Signature of Managing Agent

Date

For Official Use Only:	
_____	Date Paid
_____	Check No.
_____	Amount

BOROUGH OF WEST BROWNSVILLE
Phone: 724-785-2475

238A MIDDLE STREET
West Brownsville, PA 15417

APPLICATION FOR RENTAL LICENSE TENANT LISTS

Location: _____

Date: _____

Owner/Agent: _____

Phone: _____

Email Address: _____

Please provide a permanent home address & telephone number for each tenant

Tenant's Information – ALL tenant's must be listed – please continue on the back if necessary

Rental Type: _____ Residential – _____ Multi-Unit

Tenant Name: _____

Address: _____

Phone: _____

Employer Name: _____

Employer Address: _____

Employer Phone: _____

Tenant Name: _____

Address: _____

Phone: _____

Employer Name: _____

Employer Address: _____

Employer Phone: _____

Tenant Name: _____

Address: _____

Phone: _____

Employer Name: _____

Employer Address: _____

Employer Phone: _____

AFFIDAVIT

I verify that I, _____, am the owner of record for the property located at _____, West Brownsville Borough, Washington County,

PA. I hereby indicate that the property in question is not considered a rental property, according to the West Brownsville Rental Ordinance No. 2023-361, for the following reason (s). Please check any and all that may apply along with a written explanation as required.

_____ The property is permanently vacant and not rented.

_____ The property is used for nonresidential purposes (explain use under comments)

_____ The property is a residential property but is currently not rented (A license and inspection is required before the property is rented in the future).

_____ The property is occupied by a family member (please list names and relationships under comments).

_____ I certify that the previous tenants that were listed last year have not changed.

Ordinance No. 2023-361 (Rental Ordinance) states that if a new tenant occupies this structure, an inspection MUST be completed prior to occupancy. The landlord is required to notify the code enforcement officer to set up an inspection. If the structure falls under HUD (Housing and Urban Development) and their inspection was completed and is valid within 6 months from the date of the application, then no inspections is required. A copy of the inspection report MUST be included with this application.

COMMENTS: _____

I verify that the statements made in this form are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa.CS-4904 relating to unsworn falsification to authorities.

Name _____ Date _____
Signature

NOTARY SEAL OF ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of the document.

Commonwealth of _____

County of _____

On this, the _____ day of _____, 20_____, before me

_____, personally appeared

known to me or satisfactorily proven to be the person(s) whose name(s) are subscribed to the within instrument, and acknowledged that they executed the same in their authorized capacity, and that by their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the Commonwealth of Pennsylvania that the foregoing paragraph is true and correct

In witness whereof, I hereunto set my hand and official seal.

Notary Public

SEAL