

BOROUGH OF GIRARDVILLE

Girardville Code Enforcement Office

Borough Hall, 201 N 4th Street, Girardville, PA 17935

Occupancy Inspection & Rental Registration: Office (570) 276-2006 | Direct (570) 573-7195 | nhazlett@girardvilleborough.org

2026 ANNUAL RENTAL REGISTRATION AND OCCUPANCY PERMIT APPLICATION

For non-owner-occupied residential rental units

Completed forms may be submitted in person at Borough Hall, by mail, or via email. Fee payments must be made by check or money order only; cash is not accepted.

Use this form for annual rental registration, rental occupancy inspection, tenant-change reinspection, and return-to-service of rental units. Do not use this form as the standalone resale/transfer application. If a property has been sold or transferred, the resale/transfer application must also be completed.

Rent-to-own / land-contract notice: Properties occupied by someone other than the deeded owner are considered rental properties and must be registered and inspected as required by Borough ordinance. Immediate family exemption, if recognized by Borough policy or ordinance, should be confirmed by the Borough before relying on it.

APPLICATION INFORMATION

Date:	
Application Type:	<input type="checkbox"/> Initial Rental Registration <input type="checkbox"/> Annual Renewal <input type="checkbox"/> Tenant Change / Reinspection <input type="checkbox"/> Vacant Unit Return to Service
Property Address:	
Tax Parcel / Map ID:	
Type of Ownership:	<input type="checkbox"/> Private Individual <input type="checkbox"/> Joint Owners <input type="checkbox"/> LLC <input type="checkbox"/> Corporation <input type="checkbox"/> Trust/Estate Other: _____

OWNER INFORMATION

Owner / Entity Name:	
Names of Controlling Persons / Members:	
Mailing Address:	
City, State, ZIP:	
Phone Number:	
Email:	
Purchase Date:	

AGENT / RESPONSIBLE PARTY INFORMATION

If the owner resides further than twenty (20) miles from the Borough, a local responsible party is required. P.O. Boxes and business-only mailing addresses do not qualify. The responsible party must be available for emergency issues, service, access coordination, and Borough notices.

Name / Company:	
Physical Address:	
City, State, ZIP:	
Phone Number:	
Email:	
24/7 Emergency Contact:	

INSURANCE INFORMATION

Proof of current property, hazard, homeowner/landlord, or liability insurance may be requested. Insurance information may be verified with the carrier or agent.

Insurance Company:	
Policy Number:	
Policy Expiration Date:	
Insurance Agent / Contact:	
Agent Phone / Email:	

MUNICIPAL ACCOUNTS / REFUSE / UTILITIES

Refuse Contractor / Account:	
Refuse Account Paid to Date?	<input type="checkbox"/> Yes <input type="checkbox"/> No If no, amount due: \$ _____
Water / Sewer / GAMA Account Status:	<input type="checkbox"/> Current <input type="checkbox"/> Delinquent <input type="checkbox"/> Not applicable / unknown
Real Estate Taxes Current?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown

VEHICLE INFORMATION ASSOCIATED WITH OCCUPANTS / PROPERTY

Make	Model	Year	Tag #	Unit / Occupant

PROPERTY DESCRIPTION

Property Type:	<input type="checkbox"/> Single-Family <input type="checkbox"/> Two-Family <input type="checkbox"/> Duplex <input type="checkbox"/> Multi-Unit <input type="checkbox"/> Mixed Use
Total Number of Dwelling Units:	
Number of Rental Units:	
Number of Vacant Units:	
Primary Heat Source:	
Heat Maintenance / Responsible Party:	
Utilities Active?	<input type="checkbox"/> Electric <input type="checkbox"/> Water <input type="checkbox"/> Sewer <input type="checkbox"/> Heat <input type="checkbox"/> Other: _____

VACANT PROPERTY / VACANT UNIT INFORMATION

Complete this section if any unit is vacant, unoccupied indefinitely, or will not be occupied at any point during the registration year.

Any Unit Currently Vacant?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Vacant Since / Approximate Length:	
Reason for Vacancy:	
Grounds / Property Maintenance Contact:	
Work Being Performed?	<input type="checkbox"/> Yes <input type="checkbox"/> No Permits obtained? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

RENTAL UNIT FEE CALCULATION

2026 Fee Schedule

Fee Item	Rate	Quantity	Amount Due
Rental registration / occupancy permit	\$125.00 per unit	_____ units	\$ _____
Total Amount Due			\$ _____

Make checks or money orders payable to Borough of Girardville.

UNIT AND TENANT SUMMARY

Attach the Girardville Tenant / Occupant Registration Sheet. Use additional sheets if needed. Each unit should be listed separately, including vacant units.

Unit / Apt #	Occupied?	Adult Occupants 18+	Tenant Name(s) / Vacant	Move-In Date	Notes
	<input type="checkbox"/> Yes <input type="checkbox"/> No				
	<input type="checkbox"/> Yes <input type="checkbox"/> No				
	<input type="checkbox"/> Yes <input type="checkbox"/> No				

INSTRUCTIONS

- Attach the Tenant / Occupant Registration Sheet to this application.
- All non-owner-occupied residential units must be registered and inspected as required by Borough ordinance and Borough procedures.
- The application is not considered complete until all required information and applicable fees are received.
- The Borough may deny, withhold, suspend, or revoke approval where the unit fails inspection, where required information is missing, or where the owner fails to comply with applicable Borough requirements.
- A new inspection or reinspection may be required before a unit is rented, re-rented, reoccupied, placed back in service, or continued in rental use after a triggering event under Borough ordinance.

CERTIFICATION AND AUTHORIZATION

I certify that the information provided on this application and any attached tenant/occupant sheets is true and correct to the best of my knowledge. I authorize the Borough Code Enforcement Officer and/or authorized Borough representatives to inspect the property and rental units as required for rental registration and occupancy approval. I understand that false statements may subject me to penalties under 18 Pa.C.S. § 4904, relating to unsworn falsification to authorities, and may result in denial, suspension, or revocation of Borough approval.

Signature of Owner/Authorized Agent:	
Printed Name and Title:	
Date:	

OFFICE USE ONLY

Payment:	<input type="checkbox"/> Check # _____ <input type="checkbox"/> Money Order # _____ Amount Paid: \$ _____
Receipt / Date Received:	Receipt # _____ Date Received: _____
Processed By:	_____
Inspection:	Date: _____ Fire: _____ Code: _____
Result:	<input type="checkbox"/> Approved <input type="checkbox"/> Failed <input type="checkbox"/> Certificate of Non-Compliance Issued <input type="checkbox"/> Reinspection Required
Permit / Approval:	Permit No.: _____ Date Issued: _____