

CONCORD TOWNSHIP
43 THORNTON ROAD
GLEN MILLS, PA 19342
610-459-8911

RESALE CERTIFICATION APPLICATION

CHAPTERS 87, 90, 91, 136 (& 210 BY REFERENCE) OF THE TWP. CODE, - REQUIRE THAT ALL PROPERTIES ARE POSTED FOR EASY IDENTIFICATION; WITH STREET NUMBERS - MINIMUM 4" HIGH, 36" ABOVE GRADE LEVEL, CONTRASTING TO BACKGROUND COLOR. SMOKE DETECTORS/CARBON MONOXIDE ALARMS MUST BE INSTALLED AND IN PROPER WORKING ORDER. ALL CURBING, SIDEWALKS AND/OR DRIVEWAY APRONS WITHIN R.O.W. MUST BE IN GOOD CONDITION, REPAIRS IF NECESSARY, MUST BE COMPLETED PRIOR TO SETTLEMENT. PRIVATE SEWER LATERALS ARE ALSO REQUIRED TO BE INSPECTED BY THE CTSD PRIOR TO ISSUANCE OF RESALE CERTIFICATE.

*****NOTE: 3 AFFIDAVITS (House Numbering/Smoke Detector-CO Alarm/In Ground Swimming Pool) INCLUDED WITH APPLICATION MUST BE NOTARIZED (RETURN ORIGINALS ONLY, COPIES NOT ACCEPTED!!)**

PLEASE TYPE OR PRINT CLEARLY!! (*DENOTES FIELD THAT MUST BE COMPLETED!)

*ADDRESS OF PROPERTY: _____

*APPLICANT NAME: _____ *ADDRESS: _____
(REAL ESTATE AGENT & CO NAME OR HOMEOWNER NAME - RESALE CERTIFICATION WILL BE SENT TO THIS PERSON)

*CITY: _____ *STATE: _____ *ZIP _____

*TELEPHONE #: _____ *FAX: _____ * E-MAIL _____

*SELLER'S NAME: _____ *ADDRESS: _____

*CITY: _____ *STATE: _____ *ZIP _____

*TELEPHONE #: _____ *E-MAIL _____

*BUYER'S NAME: _____ *CURRENT ADDRESS: _____

*CITY: _____ *STATE: _____ *ZIP _____

*TELEPHONE #: _____ E-MAIL _____

*PRESENT USE: _____ *PROPOSED USE _____
(EX: RESIDENTIAL OR COMMERCIAL BUSINESS) (EX: RESIDENTIAL OR COMMERCIAL BUSINESS)

*SETTLEMENT DATE: _____

*TITLE COMPANY: _____ *ADDRESS: _____

*TYPE OF RESALE CERTIFICATION (PLEASE CHECK):

RESIDENTIAL WITH ON-SITE SEPTIC SYSTEM	\$100.00	_____
RESIDENTIAL ON CTSD PUBLIC SEWER SYSTEM	\$200.00	_____ 2 CHECKS (100.00 TO CT & 100.00 to CTSD)
CONDOMINIUM (SEPTIC OR SEWER)	\$100.00	_____
COMMERCIAL WITH ON-SITE SEPTIC SYSTEM	\$150.00	_____
COMMERCIAL ON PUBLIC SEWER SYSTEM	\$250.00	_____ 2 CHECKS (150.00 TO CT & 100.00/line to CTSD)
APARTMENTS	\$35.00/UNIT	_____

The undersigned certifies that the statements made in the foregoing Application for Resale Certification Statement are true and correct to the best of his/her knowledge, information and belief, and are made subject to the penalties of 18 Pa. C.S. Sec. 4904, relating to unsworn falsification to authorities.

* _____
(SIGNATURE OF APPLICANT)

PLEASE NOTE: THE PROCESSING OF THIS APPLICATION REQUIRES APPROXIMATELY 3-4 WEEKS. THE FEE MAY BE PAID BY CASH/MONEY ORDER/CHECK AND MADE PAYABLE TO CONCORD TOWNSHIP.