

Neighborhood Blight Reclamation and Revitalization Act
Act 90 of 2010, 53 Pa. C.S. Section 6101 et seq
DISCLOSURE FORM

Municipality _____

Application Date: _____ Application No.: _____

1. PROPERTY INFORMATION

Tax Map: _____ Address: _____

Parcel ID No.: _____

Zoning: _____

2. OWNER'S/APPLICANT'S INFORMATION

Name: _____

If a business entity, any other fictitious names: _____

Address: _____

3. CERTIFICATION

Applicant and/or owner certify that for this property and any other property in the Commonwealth of Pennsylvania owned by Applicant and/or Owner, that the following do not apply:

_____ There are no final and appealable tax, water, sewer or refuse collection delinquencies on account of the Applicant and/or Owner.

_____ There are no serious violations of State law or codes for which the Applicant and/or Owner has taken no substantial steps to correct the violation within six (6) months following notification of the violation and for which fines or other penalties were imposed by a Magisterial District Judge or Municipal Court, or, a Judgment in law or in equity was imposed by a Court of Common Pleas.

I hereby certify that I am owner of record of the named property, or that the proposed permit is authorized by the owner of record and that I have been duly authorized by the owner to make this disclosure as their authorized agent. I understand that false statements herein are made subject to the penalties of 18 Pa C.S. Section 4904, relating to Unsworn Falsifications to Authorities.

Applicant Signature _____ Date _____ 20__