

West Grove Borough 117 Rosehill Avenue P.O. Box 61 West Grove, PA 19390

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## **APPLICATION FOR RENTAL INSPECTION Property Owner Information**

Owner/Applicant:			Date:
Owner's Address:			
Phone: (H)(Cell)		(W)	
For all Address of			
	Property/Unit Info	ormation	
Dwelling Address:			
Number of Units:		Number of Occupa	ants:
Occupied:		Unoccupied:	
Tax Parcel Number	<del>.</del>	Total Due:	\$150.00
Please make checks payable to "West Grove Borough"			
	For Borough Us	•	
Date Received:		Amount Received:	
Check Number:		Cash:	
Date and Time of Inspection	n:		