Borough of West Mayfield

Occupancy Permit - Smoke & Dye Test Application

Current Owner(s)Seller(s): _____

Property Address: _____, Beaver Falls PA 15010

Contact Information: Primary Telephone: _____

Secondary Telephone: _____[ ] Cell [ ] Work

Email Address: _____

Is this property currently occupied? [ ] Yes [ ] No

If "No", how long has the property been unoccupied: _____

Buyer(s):_____

Contact information: Primary Telephone: _____

Secondary Telephone: _____[ ] Cell [ ] Work

Email Address: _____

Closing Company (if applicable):_____

Agent:_____ Contact Info: Phone:_____

email:_____

Has an Independent Home Inspection been performed on this property? [ ] Yes [ ] No

If "Yes", please submit a copy with this application. A summary of deficiencies is acceptable.

NOTE: A Smoke & Dye Test is required for this sale.

FEES:

Occupancy Permit	$150.00
Smoke & Dye Test	$50.00
Total	**$200.00**

Make Check(s) Payable to: Borough of West Mayfield

Any Questions: 724-494-1223

Mail to: West Mayfield Borough

%: Code Enforcement Officer

3631 Ann St

Beaver Falls, PA 15010

Borough Use ONLY

Application Rec'd:_____ Check No.: _____ Amount: _____

Tax Parcel No.: _____

OP No.: _____ Date Issued: _____ SD No.: _____ Date Issued: _____

Form: Rev 2026-07-21