



COMMUNITY SERVICES DEPARTMENT
PO Box 280
Clayton, OH 45315
P: (937) 836-3500 F: (937) 836-6773

FOR OFFICE USE ONLY:

INSPECTION FEE: \$ _____

REINSPECTION FEE: \$ _____

APPLICATION FOR PRE-SALE OCCUPANCY INSPECTION

PLEASE PRINT ALL INFORMATION

Address of Property for Sale _____

Date _____

Owner of Property/Address if Different than above _____

Realtor for Owner _____	Realty Company Name/Address _____	Phone _____
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- DWELLING: Single-Family Two-Family (Side/Side) Two-Family (Up/Down)
 Condominium Rental Property

STRUCTURES EXISTING ON PROPERTY:

- | | | |
|---|--|--|
| <input type="checkbox"/> Accessory Building | <input type="checkbox"/> Swimming Pool | <input type="checkbox"/> Fireplace |
| <input type="checkbox"/> Storage Shed | <input type="checkbox"/> Rear Patio Cover | <input type="checkbox"/> Carport |
| <input type="checkbox"/> Detached Garage | <input type="checkbox"/> Enclosed Rear Patio | <input type="checkbox"/> Deck/Porch |
| <input type="checkbox"/> Structural Alterations | <input type="checkbox"/> TV/CB/Radio Tower | <input type="checkbox"/> Room Addition |
| <input type="checkbox"/> Front Porch Cover | <input type="checkbox"/> Remodeled Garage | <input type="checkbox"/> Hot Tub |
| <input type="checkbox"/> Other: _____ | | |

Buyer(s) Name (if known) _____

Realtor for Buyer _____	Realty Company Name/Address _____	Phone _____
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Title Company _____	Address _____	Phone _____
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This is to certify that the seller, or his authorized representative(s), has/have read the City of Clayton Pre-Sale Exterior Housing Occupancy Inspection Program and Procedures and understand it.

APPLICANT'S SIGNATURE

PRINT NAME AND PHONE NUMBER

Vacant?: Yes No

Dog on Premises?: Yes No

Closing Date: _____

ATTENTION: The closing of any residential property in the City of Clayton with a Money Receipt and without a valid Housing Certificate constitutes a violation of the Zoning Ordinance and ALL PARTIES shall be subject to a fee of \$100 and/or legal proceedings. A \$20 FEE WILL BE CHARGED FOR ANY RETURNED CHECKS