



## APPLICATION FOR SIDEWALK INSPECTION

To be completed by transferor or representative for transferor

Applicant Requesting Inspection: \_\_\_\_\_

☐ Please check if inspection report should be sent to person requesting inspection along with transferor.

Contact Number: \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_  
Number and Street or RR City, Town, or P.O. State Zip

**Address of to be Inspected:** \_\_\_\_\_

### TRANSFEROR *(Usually the Seller):*

Name/Phone \_\_\_\_\_

Address \_\_\_\_\_  
Number and Street or RR City, Town, or P.O. State Zip

### TRANSFeree *(Usually the Buyer):*

Name/Phone \_\_\_\_\_

Address \_\_\_\_\_  
Number and Street or RR City, Town, or P.O. State Zip

### This property is exempt from the sidewalk inspection requirements pursuant to the following exemption:

\_\_\_\_\_ Transfer by Court Order      \_\_\_\_\_ Transfer by related parties      \_\_\_\_\_ Transfer by spouses in a divorce

\_\_\_\_\_ Transfer involving family corporations and partnerships deeding to owners and/or shareholders.

**I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM & THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT. I UNDERSTAND THAT BY SUBMITTING THIS APPLICATION A SIDEWALK INSPECTION WILL BE PERFORMED AND IF DEFECTS ARE FOUND, REPAIRS TO BRING THE SIDEWALK INTO COMPLIANCE WILL BE REQUIRED TO BE MADE WITHIN A SPECIFIED TIME.**

Signature: \_\_\_\_\_ Telephone No.: \_\_\_\_\_  
☐ (Transferor)      ☐ (Transferor Representative)

\*\*\*\*\*

### EXEMPTIONS:

Due to the above marked reason for exemption, this application is approved this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
City Manager