City of Garfield Heights Building Department



-CONFIDENTIAL-

Buyers Application to Obtain Compliance Certificate

Date://				
PROPERTY ADDRE	SS:			
Single Double (Che	eck one)			
	(INDIV	IDUALS ONLY	Y)	<u> </u>
OWNER #1 INFORMA	TION (as will be title	ed on Deed) ** Ple	ease Print**	3
Name of Purchaser:				
Address:				
City:	State:	Zip:		
Phone # (H)	W)	V)		
E-Mail				
E-Mail//	_/			
OWNER #2 INFORMA	TION (as will be title	ed on Deed) **Ple	ase Print**	
Name of Purchaser:				
Address:				
City:	State:	Zip:		
Phone # (H)	W)	V)		
E-Mail				
D.O. B.:/	<u></u>			

• The purpose of the inspection is to benefit the community at large and is not intended to protect the interests of any individual, owner, successor owner or occupant of the property. The City assumes no liability or responsibility for failure to report violations that may exist and does not warrant the repairs made pursuant to the inspection.



OCCUPANCY INFORMATION

I/We are purchasing the above pro	perty for:		Afficiation of Statistical Statistics and Afficiation of Statistic
To Reside in / Occupy	For Rehab	Resale	To Rent**
Will owner occupy property? Ye	s No (C	ircle One)	
Total Number of prospective occupan	nts:		
** Rental registration and approva	d required prior	to Occupancy	
Name(s) of Occupants:			
Names/ages of children and/or occup	ants:	***************************************	
Name:		Age:	MINISTRATOR TRANSPORTE
Garfield Heights, OH #1 Buyer Signature:			
#2 Buyer Signature:			-
Subscribed and sworn to me this	day of	, 20	
(Please print buyer(s) name(s) here from	photo ID)		
Ву:			
Ву:			
Notary Public:	my commissi	on expires:	
Proposed Transfer Date: /	/		