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2026
REMOVAL OF COOKING FACILITIES FROM TEMPORARY DWELLING UNIT

ZONING ORDINANCE 184-71.B(6)(D) REQUIRES "...THE REMOVAL OF COOKING FACILITIES IN ONE OF THE DWELLING UNITS WITHIN SIX (6) MONTHS AFTER THE DWELLING UNIT IS NO LONGER OCCUPIED BY A MEMBER OF THE OWNER'S IMMEDIATE FAMILY."

THIS FORM CERTIFIES THAT THE COOKING FACILITIES HAVE BEEN REMOVED FROM THE TEMPORARY UNIT FOR RELATIVE LOCATED AT THE PROPERTY LISTED BELOW, AND THE PROPERTY IS AVAILABLE FOR TOWNSHIP INSPECTIONS IF REQUESTED.

1. OWNER OF PROPERTY

NAME _____

ADDRESS _____

TELEPHONE NUMBER _____ EMAIL _____
 HOME CELL

CONSENT TO FUTURE EMAIL COMMUNICATION

SEWER PUBLIC ON-SITE

2. TEMPORARY UNIT

UNIT ADDRESS (IF DIFFERENT FROM #1) _____

I CERTIFY THAT THE COOKING FACILITIES HAVE BEEN REMOVED FROM THE TEMPORARY DWELLING UNIT.

3. AFFIDAVIT

I HAVE BEEN GIVEN A COPY OF SECTION 184-71.B(6) OF THE LIMERICK TOWNSHIP ZONING ORDINANCE REGARDING REGULATIONS FOR TEMPORARY UNIT FOR RELATIVE. I HEREBY AFFIRM THAT THE ABOVE FACTS AND STATEMENTS, INCLUDING ANY ATTACHMENTS, ARE TRUE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF. I FURTHER UNDERSTAND THAT ANY FALSIFICATION OF INFORMATION HEREIN IS MADE SUBJECT TO THE PENALTIES OF PA CONS. STAT. 4904 RELATING TO UN-SWORN FALSIFICATION TO AUTHORITIES.

SIGNATURE _____ DATE _____
PROPERTY OWNER