


City of  Desloge

**APPLICATION FOR OCCUPANCY INSPECTION**  
*Chapter 540 Property Maintenance*

Date: \_\_\_\_\_  
Property Owners Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Occupant/Tenant's Name: \_\_\_\_\_  
Address of Dwelling Unit: \_\_\_\_\_  
Best Time Available for Inspection: \_\_\_\_\_  
Telephone Number to Allow Access to Dwelling: \_\_\_\_\_  
Number of Persons Who Will Reside at Address: \_\_\_\_\_

NOTE: This inspection does not assure the safety or security of the dwelling unit(s) noted above.

NOTE: Key only inspections will not be made if any personal effects of the tenant or others are located within the dwelling unit to be inspected.

NOTE: It is understood that the City of Desloge, and its inspectors cannot be held liable for damage caused by any undetected hazards or violations not found or noted during this inspection.

\_\_\_\_\_  
Signature of Owner or Authorized Agent

Rental - \$30.00 \_\_\_\_\_  
Sale - \$50.00 \_\_\_\_\_  
Re-Issued - \$0.00 \_\_\_\_\_

**For Office Use Only**

Date Fee Paid: \_\_\_\_\_ Date Property Inspected: \_\_\_\_\_  
Approval of Building Inspector: \_\_\_\_\_  
Occupancy Permit Number: \_\_\_\_\_ Date Permit Issued: \_\_\_\_\_