

Certificate of Compliance

Inspection Date(s) _____

Address of Property _____

Person to Contact for Inspection _____ Phone # _____

Name of Seller _____ Phone # _____

Address of Seller _____

Name of Purchaser _____ Phone # _____

Address of Purchaser _____

Sellers Attorney _____ Phone # _____

Violation repairs require permits by licensed & bonded contractors registered with the Village of Harwood Heights.

This certificate shall be null and void 6 months following real estate revenue transfer stamps necessary for occupancy of building.

Violations must be corrected prior to transfer of property by order of the Village of Harwood Heights

DO NOT WRITE BELOW

Legal, non conforming _____ Units
 In the following district

| | Basement | 1st Fl. | 2nd Fl. | 3rd Fl. | 4th Fl. | Attic |
|-----------------|----------|----------|---------|---------|---------|-------|
| Living Rm. | | | | | | |
| Dining Rm. | | | | | | |
| Bedroom | | | | | | |
| Bathroom | | | | | | |
| 1/2 Bath | | | | | | |
| Kitchen | | | | | | |
| Den | | | | | | |
| Family Rm. | | | | | | |
| Rec. Room | | | | | | |
| Open Unfin. | | | | | | |
| Utility Area | | | | | | |
| Storage Rm. | | | | | | |
| Furnace Rm. | | | | | | |
| Laundry Rm. | | | | | | |
| Addition | | | | | | |
| Other | | | | | | |
| | Open | Enclosed | Brick | Frame | Other | |
| Front Porch | | | | | | |
| Rear Porch | | | | | | |
| Rear Deck | | | | | | |
| Garage | | | | | | |
| Drive / Parking | | | | | | |

- ___ R 1 S/F Detached
- ___ R 2 S/F Attached & Multiple F Res.
- ___ R 3 Multiple Family Residence
- ___ R 4 Multiple Family Residence
- ___ B 1 Neighborhood Shopping
- ___ B 2 Central Shopping
- ___ M 1 Manufacturing
- ___ M 2 Manufacturing
- ___ PUD Planned Unit Development

Number of Apartments _____

Water ON / OFF

Electric Meters _____

Size of Service _____

Bond Amount \$ _____

 Building Inspector Date

 Plumbing Inspector Date

 Electrical Inspector Date