

Jim Thorpe Borough  
101 East 10th Street  
Jim Thorpe, PA 18229  
(570) 325-3025

REQUEST FOR ACTION

Date of Request: \_\_\_\_\_

Your Name: \_\_\_\_\_

Your Address: \_\_\_\_\_

Telephone Number: (Day) \_\_\_\_\_

(Night) \_\_\_\_\_

Request For Action  
Narrative of Request for Action and exact location of request

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If violation, is it visible from the public right-of-way: Y/N

If violation, is it visible from your property: Y/N

If violation, do we have consent to enter your property to view the violation: Y/N

Applicant Signature: \_\_\_\_\_

For Official Use Only

Department: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_