DEMOLITION PERMIT APPLICATION

DATE :_____

PROPERTY LOCATION:_____

OWNER:_____

ESTIMATED COST OF WORK: $_____

USE OF BUILDING: ☐RESIDENTIAL ☐COMMERCIAL ☐OTHER

NUMBER OF STORIES: TYPE OF CONSTRUCTION:

DIMENSIONS OF BUILDING: DIMENSIONS OF LOT:

TOTAL SQ. FT.: DATE DEMOLITION TO BEGIN:

PA ONE CALL SERIAL #: DATE CALLED:

Preliminary Arrangements for Issuance of Demolition Permit

SIGNATURE OF OWNER: x DATE:

INSURANCE COMPANY: POLICY #:

Utilities Released *(signatures required)*

PPL: x DATE:

UGI: x DATE:

CABLE TV: x DATE:

ADJOINING PROPERTY OWNERS *(must be notified of intent to raze)*

x DATE:

x DATE:

SEWER DISCONNECT: ☐ PUBLIC ☐PRIVATE

WATER DSCONNECT: ☐ PUBLIC ☐PRIVATE

DEMOLITION CONTRACTOR OR AUTHORIZED AGENT:

ADDRESS:

BUILDING OFFICIAL'S SIGNATURE: x DATE:

Plans for pedestrian and vehicle protection must be submitted and approved if applicable. Lots must be left in a mow able condition with no evidence of the demolished structure including foundation, unless otherwise approved by the Building Code Official.

Copies of the following must be attached:

1 Certified Landfill Documentation.
2 Asbestos/lead inspection and abatement.
3 Copy of insurance.
4 Contractor's license and insurance

5 Deed to property