

**APPLICATION FOR BUILDING PERMIT
CITY OF SCRANTON**

Is the property a condemned property in the City of Scranton? YES_____ NO_____

1. Property Address _____ Tax Identification No. _____
2. Is the proposed building operation the construction of an entirely new structure or the alteration or enlargement of an existing structure? _____
3. Name of Property Owner: _____
4. Address of Property Owner: _____
5. Location of Proposed Job Site: _____
6. Existing Use of Structure: _____
7. Are the Property's Improvements Currently Fire Damaged? Yes No
If Yes, is the City Treasurer holding insurance proceeds until the improvements are completed and approved?
 Yes No

8. (a) Existing Use of Improvements on the Property:

Residential One Family Two or more – Enter Number of Units: _____

Apartment Building – Number of Apartments _____ Number of Stories _____ Height _____

Hotel Motel Dormitory Rooming House – Number of Apartments, Rooms _____

Non-Residential Store School Church Hospital

Office Bank Industrial Restaurant

Other/Specify: _____

(b) Proposed Use:

Residential One Family Two or more – Enter Number of Units: _____

Apartment Building – Number of Apartments _____ Number of Stories _____ Height _____

Hotel Motel Dormitory Rooming House – Number of Apartments, Rooms _____

Non-Residential Store School Church Hospital

Office Bank Industrial Restaurant

Other/Specify: _____

NOTE: THE ANSWERS AND INFORMATION PROVIDED IN PARAGRAPHS 8 (a) AND (b) ABOVE, DO NOT WAIVE THE REQUIREMENTS AND CONDITIONS REQUIRED BY THE CITY OF SCRANTON ZONING ORDINANCE FILE OF COUNCIL 74 OF 1993.

FURTHER, ANY RELIEF GRANTED BY THE APPROVAL OF THIS BUILDING PERMIT, DOES NOT WAIVE OR IMPLICITLY APPROVE ANY RELIEF REQUIREMENTS REQUIRED BY OTHER CITY ORDINANCES, INCLUDING BUT NOT LIMITED TO THE CITY OF SCRANTON ZONING ORDINANCE.

FURTHER, IF ANY OF THE ANSWERS TO QUESTIONS HEREIN OR INFORMATION PROVIDED ARE FALSE OR A MISREPRESENTATION, SHALL VOID THIS PERMIT AND SAME WILL BE REVOKED.

9. Is the Property located on a corner lot? Yes No
 Size of lot _____ Feet in Front _____ Feet in Rear _____
 Feet average depth _____ *Square Feet in total area* _____
10. The structure will have a maximum width of _____ feet and a maximum depth of _____ feet and will occupy _____ square feet of the land after construction or alteration is completed. All other structures upon the lot will occupy a total of _____ square feet addition.
11. The nearest distance of the structure from the boundary line of the lot will be as follows:
 _____ feet from the rear lot line; _____ feet from the left side line; _____ feet from the right side line; _____ feet from the front lot line.
12. The accompanying plot or plan hereto attached and made a part hereof is drawn to scale and shows the actual dimensions of the lot to be built upon, the size of the structure to be erected or altered and the proposed relative position on the lot of such structure and all other structures.
13. The total cost of the proposed building operation, labor and materials \$ _____
14. Permits will be issued to Licensed Contractors or Home Owner occupants only.
15. All licensed contractors applying for a permit must submit a complete executed copy of their contract and insurance for the proposed work before a permit can be issued.
16. Plumber _____ HVAC Contractor _____
 Electrician _____ Contractor _____
17. Identification – To be completed by all applicants. Contractors License No. _____

| | Name | Mailing Address - Number, Street, City & State | Zip Code | Telephone Number |
|------------|------|--|----------|------------------|
| Owner | | | | |
| 1 | | | | |
| Contractor | | | | |
| 2 | | | | |
| Architect | | | | |
| 3 | | | | |

Brief description of work being performed:

Is the dumpster for this job on the street? Yes No If yes, an additional dumpster permit is required. The cost is \$10.00 per day.

*I the homeowner certify that the information I have submitted is correct and that I am doing the work myself. I have not hired a contractor to do this work.

SIGNATURE

Notice: Separate permits are required for electrical, plumbing, heating, ventilating or air conditioning.

This permit becomes null and void if work or construction authorized is not commenced within 180 days or if construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced.

I swear or affirm that my statements and answers above are true and complete to the best of my knowledge and belief. I also realize that I will be subject to criminal penalties provided by 18 PA.C.S. §4903 and §4904 if I have provided false answers and statements.

SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT

DATE

NOTE: ALL WORK SHALL COMPLY WITH THE PENNSYLVANIA UNIFORM CONSTRUCTION CODE, ACT 45 OF 1999.

NO WORK IS TO START UNTIL APPLICANT RECEIVES AN APPROVED PERMIT AND IT POSTED AT THE JOB SITE.

OFFICIAL USE ONLY

APPROVED: YES NO DATE: _____

SIGNATURE OF ZONING OFFICER

APPROVED: YES NO DATE: _____

SIGNATURE OF BUILDING CODE OFFICIAL