

**APPLICATION FOR MECHANICAL PERMIT
CITY OF SCRANTON**

Is this property a condemned property in the City of Scranton? YES _____ NO _____

Application is hereby made on behalf of the owner of premises herein described for a mechanical permit and the following statements of fact and answers to questions are represented as true and correct.

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 in a flood zone? Yes No

- 10. The total cost of the proposed mechanical operation, labor and materials \$ _____

- 11. 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.

- 12. 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 \$5.00 per day.

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
APPROVED:	YES	NO	DATE: _____	_____ SIGNATURE OF MECHANICAL INSPECTOR