REQUIREMENTS FOR SUBMITTING A PERMIT APPLICATION

- Permit application(s) must be filled out <u>in full</u> with true and correct information, no exceptions.
- Only a property owner, contractor or authorized agent can submit a permit.
- A signed contract by both parties must be supplied with the permit application.
- Permit & Inspection (if required) fees to be submitted with permit application.
- If the property owner is listed in a company, corporation or any other fictitious name or entity the member/authorized agent(s) must provide proof of ownership for the property (paperwork from the PA Department of State Bureau of Corporations and Charitable Organizations)
- City of Scranton issued contractors's license, and proof of insurance for the contractor.

APPLICATION FOR A DEMOLITION PERMIT

CITY OF SCRANTON

1. Is the Property Cond	emned?	Yes	No					
2. Property Map Id Number(<i>Required</i>)								
3. Name of Property Owner:								
4. Authorized Agent of Property (If applicable)								
5. Address of Property Owner:								
6. Telephone Number of Owner:								
7. Location of Job Site: _			***					
8. Is the Property Located in a Flood Zone? Yes No								
9. Kind of Structure:								
10. Is Existing use of Property a Single Family Dwelling? Yes No								
 If no, what is the cur 								
 If multi dwelling, how 								
11. Size of Lot:								
12. Size of Structure	2. Size of Structure Total Square Ft							
13. Asbestos Abatement Contractor (If Applicable):								
14. Does this structure att	tach to a pa	– rtv wall?						
If yes, the owner or contractor s weatherproofing the party wall o brickote, gunite, or other approv	hall provide this on the exposed s	Department with	h a bond to cove	er the cost	of			
15. How far away is the new	earest struc	ture from th	e proposed	l demol	ition:			
16. Are there any other st	ructures on	this lot?						
17. Were Construction Pr	ints Submitt Yes - No	•	ensed Archi	itect/En	gineer?			
If yes, are plans approv	/ed? Yes	No						

NOTE: THE ANSWERS AND INFORMATION PROVIDED IN PARAGRAPH 8 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 DEMOLITION 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 THE SAME WILL BE REVOKED.

ALL LICENSED CONTRACTORS APPLYING FOR A PERMIT MUST SUBMIT A COMPLETE EXECUTED COPY OF THEIR CONTRACT AND INSURANCE FOR THE PROPOSED WORK BEFORE THE PERMIT IS ISSUED.

18. Total cost of the proposed demolition operation of labor and materials: \$
19. Contractor Identification - To be completed by all applicants.
City of Scranton Contractor's License Number
Contractor's PA Registration Number
Contractors/Business Single Tax Office Account Number
Contractor's Name
Contactors Address
Contractor's Phone Number
***If Applicable: Architect's Name& Address:
Architect's Telephone Number:
20. Detailed description of demolition work being performed:
21. Is there a dumpster for this job on the street? Yes No (# of Days)
(If yes, an additional dumpster permit is required. The cost is \$10.00 per day).

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

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 ADANDONED 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.C 4903 and 4904 if I have provided false answers and statements.

Signature of C	Contractor o	r Authorized Aç	 gent	Date			
**NOTE: ALL W CONSTRUCTIO			THE PENNSYLVA	ANIA UNIFORM			
**ALL PERMITS ARE TO BE FILLED OUT IN FULL. FAILURE TO DO SO MAY RESULT IN THE DENIAL OF THE PERMIT. **							
** NO WORK I			PPLICANT RECIEN AT THE JOB SIT	VES AN APPROVED E. **			
OFFICIAL USE ONLY							
APPROVED: YES	NO _	DATE	SIGNATURE	OF ZONING OFFICER			

SIGNATURE OF BUILDING CODE OFFICIAL

APPROVED: YES

NO

DATE