

**CODE ENFORCEMENT APPLICATION**

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

**APPLICATION FOR:**

BUILDING PERMIT

HVAC PERMIT

SPRINKLER PERMIT OCCUPANCY CERTIFICATE

FIRE

PROTECTION PERMIT

PLUMBING

OTHER \_\_\_\_\_

Location of Work: \_\_\_\_\_

Description of proposed work: \_\_\_\_\_

Owner: \_\_\_\_\_

Contractor: \_\_\_\_\_

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

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

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

**WORKERS COMPENSATION ACT / PA 44 OF 1993**

Insurance Company Name : \_\_\_\_\_ Policy # / Expiration: \_\_\_\_\_

Property Owner \_\_\_\_\_ Affidavit of Exemption \_\_\_\_\_ Certificate of Self-Insurance \_\_\_\_\_

Applicant's Signature \_\_\_\_\_

*Applicant certifies that all information is correct and shall be responsible for reviewing and understanding all permit conditions and insuring to all applicable Codes and Ordinances.*

**BOROUGH STAFF ONLY**

ZC \_\_\_\_\_ Subdivision \_\_\_\_\_ Lot Size \_\_\_\_\_ L&B \_\_\_\_\_ ICC Ed \_\_\_\_\_

Use Group \_\_\_\_\_ Type of Construction \_\_\_\_\_ Area \_\_\_\_\_ ZHB # \_\_\_\_\_

Board of Appeals \_\_\_\_\_

Application: Approved / Denied- Reason's) \_\_\_\_\_

Signature of Appropriate Official: \_\_\_\_\_

\_\_\_\_\_  
Name Date Title

Permit Fees: \_\_\_\_\_

\_\_\_\_\_

Total: \_\_\_\_\_

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