

INDIANA COUNTY

Office of Planning and Development
801 Water Street
Indiana, PA 15701
(724) 465-3870 Fax (724) 465-3151

FOR OFFICE USE ONLY	
Permit #	_____
Date:	_____

Building Permit Application ~Residential Demolition~

Site Address _____

City _____

Municipality _____ Township / Borough _____

What is being demolished? _____ Estimated Cost of Project \$ _____



YOU MUST PROVIDE A TAX PARCEL NUMBER FOR THE PROPERTY AT THE SITE ADDRESS LISTED ABOVE

Tax Parcel # _____

Owner of Property _____

Current Mailing Address of Owner _____

City _____ State _____ Zip Code _____

Owner's Phone Number _____ Cell Phone _____

Owner's E-mail Address: _____

Contractor: _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____ Cell Phone _____

E-mail Address: _____

Water supply: _____ Sewage: _____

Electricity provider: _____

Name typed or printed

Signature Date

SUBMITTAL REQUIREMENTS FOR RESIDENTIAL PROJECTS

When submitting your application for a Residential project please include the following:

1. Completed Building Permit Application
2. Please have your 911 address on your application.
3. If you don't know your tax parcel number for your property, to put on your application, please contact the Tax Office at 724-465-3812.
4. Your contractor's workman's compensation and liability insurance. If you are not using a contractor or your contractor doesn't have workman's compensation insurance, please complete the Workman's Comp form and have it notarized.
5. \$25.00 non-refundable application fee – please make checks payable to ***Indiana County Code Division***
6. A photo of the structure(s) that is to be demolished must accompany this application.

DEMOLITION GUIDELINES AND CHECKLIST

ALL INFORMATION MUST BE FILLED IN, CHECKED OR MARKED N/A

_____ I have/will notified all adjoining neighbors of the demolition project (one week in advance)

_____ Pennsylvania One Call has been contacted (800-242-1776) Authorization Number _____

_____ I will/have contacted the local municipality in order to inspect all disconnects and capping of all service utility connections and lines in accordance with local jurisdiction requirements including sewer and/or water lines prior to backfilling

_____ I understand that I am responsible for public safety

_____ I understand that I am responsible to fill and maintain to the existing grade so that no water may accumulate

_____ Plans for waste disposal _____ (must be an approved and accepted manner

_____ I will/have contacted DEP (www.dep.state.pa.us) for all commercial demolition projects

_____ I will/have notified all local utility companies to ensure that services have been disconnected from premises and disconnected from main lines, prior to commencing demolition

_____ I will contact the local municipality 24 hours before the demolition is started.

I have read and answered the above checklist and guideline questionnaire to the best of my ability and solemnly swear that all information given is truthful.

Signature of applicant: _____ Date _____

I/we, certify that I/we own the property for which application is made for a UCC demolition permit and that the applicant has my/our approval to demolish this property or act as my/our agent in the demolition of this property. (All property owners must sign)

Signature of Property Owner _____ Date _____

Signature of Property Owner _____ Date _____

Signature of Inspector or Authorized Office Personnel: _____ Date _____

PLEASE NOTIFY INDIANA COUNTY OFFICE OF PLANNING & DEVELOPMENT AS TO WHEN DEMOLITION WILL COMMENCE

THIS COMPLETED FORM MUST BE TURNED IN WITH APPLICATION