

West Penn Township

27 Municipal Road, New Ringgold, PA. 17960

Zoning/Code Enforcement Office

(Hours: Mon. 7am-11am, Tues. 1pm, Wed. & Thurs. 7am-12 noon)

DEMOLITION PERMIT APPLICATION

1. LOCATION OF PROPERTY

Street number

Street name

Suite # (if applicable)

2. DESCRIPTION OF BUILDING/STRUCTURE TO BE DEMOLISHED

3. CHECK ONE OF THE FOLLOWING THAT APPLY

Non-Residential Structure

Residential Structure

Accessory Structure
Description:

4. REQUIRED FORMS TO BE SUBMITTED WITH APPLICATION: (INCLUDE ALL FORMS W/APPLICATION)

Property Owner Authorization
Form D1

Sewer, Water, & Electrical Disconnect
(Lehigh Engineering 570 628-2300
Bill Anders)

Site Plan/
Property Survey

5. Applicant: Owner or Authorized agent of owner

Last name

First name

Corporation or Partnership

Street address

City:

State:

ZIP Code:

Telephone number
()

Fax number
()

6. Owner (if different from applicant)

Last name

First name

Corporation or Partnership

Street address:

City:

State:

ZIP Code:

Telephone number:
()

Fax number:
()

7. Contractor Information

Contractor/Company name:

Street Address:

City:

State:

ZIP Code:

Telephone number:
()

Fax number:
()

8. Workers Compensation
certificate provided with this
application

Yes
 No

9. Applicant is exempt (no
employees) - exemption form
completed with this
application

Yes
 No

10. I hereby acknowledge the information contained herein is true and correct, and I hereby agree that all provisions of West Penn Township Codes shall be complied with.

Applicant Signature

Date

Print name

e-mail address (optional)

50-00

DEMOLITION PERMIT
OWNERS AUTHORIZATION
FORM D-1

Authorization for Demolition provided to:

Name:

Company name:

Address:

City: State: ZIP Code:

Telephone number: () Fax number: ()

Building and Location (as noted on the attached site plan/lot survey)

Building name (if applicable):

Address:

City: State: Zip code:

Finish and sign this document in the presence of a Notary Public.

I, _____, certify that I am the legal owner of the property noted above. I hereby authorize the following individual, (print name) _____ of (print company name and address) _____

to demolish the building(s) as noted on the attached site plan/property survey located at (print building information and address) _____

Property owner's signature _____ Date _____

Print property owner's name _____

Commonwealth of Pennsylvania)
County of _____) SS:

On this, _____ day of _____, 20____, before me, _____ a Notary Public, the undersigned officer, personally appeared _____ of _____ known to me (or satisfactorily proven) to be the person whose name is subscribed to within instrument, and acknowledged that she/he executed the same for the purposes therein contained.

In witness whereof, I hereunto set my hand and official seals.

Notary Public

My commission expires: