

DEMOLITION PERMIT

BOROUGH OF MUNHALL

1900 West Street • Munhall, PA 15120 • 412-464-7310

www.munhallpa.us

Applicant's Name: _____

Represented by (if applicable): _____

Address: _____

Telephone: _____ FAX: _____

Date of Application _____ Permit No. _____

Check One: Owner of record Option Holder
 Agent for the Owner Other

If other, list relationship: _____

If not the owner of record, list the owner of record's name and address

(Please note that a letter of authorization from the owner of record is required)

Name: _____

Address: _____

Telephone Number: _____

Location of the property for which the demolition is being requested:

Between: _____ and: _____

Lot and block: _____

Permit to: _____

Proof of liability insurance: _____

Estimated Cost: _____ Permit Fee: _____

Approved by: _____ Date: _____

Code Enforcement Officer

NOTE TO PERMITTEE:

YOU MUST NOTIFY THE CODE ENFORCEMENT OFFICE FOR SEVERAL INSPECTIONS:

TO INSPECT THE EMPTY BASEMENT FOR DEBRIS

TO INSPECT THE SEWER BEING CAPPED

TO INSPECT THE QUALITY OF BACKFILL BEING USED

TO VERIFY THAT THE SITE IS FREE OF DEBRIS

NO BURNING OF ANY TYPE OF IS ALLOWED ON ANY JOB SITE AT ANY TIME.

BACKFILL WITH GROUND UP WOOD WILL NOT BE ACCEPTED.

BY ACCEPTING THIS PERMIT, THE APPLICANT AGREES TO COMPLY WITH ALL BOROUGH LAWS AND REGULATIONS.

EIN: _____

Policy Number: _____ Carrier: _____

Has this applicant been advised of the worker's compensation law? Yes No

Please provide four (4) copies to Munhall Borough