

Johnsonburg Borough
100 Main Street
Johnsonburg, PA 15845
(814) 965-5682 (814) 965-3215 fax
jbgboro@ncentral.com

APPLICATION FOR DEMOLITION PERMIT

Application fee = \$25.00

ADDRESS OF DEMOLITION SITE _____

OWNER of property where proposed demolition will occur:

NAME _____ ADDRESS _____

CITY/STATE/ZIP _____ PHONE _____

CONTRACTOR:

NAME _____ ADDRESS _____

CITY/STATE/ZIP _____ PHONE _____

BRIEF DESCRIPTION

PROPERTY TYPE: ____ RESIDENTIAL ____ COMMERCIAL ____ INDUSTRIAL

NUMBER OF STRUCTURES TO BE DEMOLISHED: _____

TOTAL SQUARE FOOTAGE OF ALL STRUCTURES TO BE DEMOLISHED: _____ SF

DATE TO START DEMOLITION: _____

DATE TO COMPLETE DEMOLITION: _____

ARE THERE PLANS TO REBUILD ON DEMOLITION SITE: ____ YES ____ NO

CERTIFICATION

I certify that I am the owner of record, or that I have been authorized by the owner of record to submit this application and that the work described has been authorized by the owner of record. I understand and assume responsibility to conform to all applicable local, state, and federal laws governing execution of this project. I certify that the Johnsonburg Borough shall have the authority to enter the areas in which this work is being performed, at any reasonable hour, to enforce the provisions of the permit. I further certify that this information is true and correct to the best of my knowledge and belief. I also acknowledge that once demolition begins, **ALL DEBRIS MUST BE REMOVED FROM THE PREMISES AND THE SITE RESTORED TO AN ORDERLY AND SANITARY CONDITION WITHIN (90) DAYS.**

SIGNATURE _____ DATE _____

PRINT NAME _____ PHONE _____

ADDRESS _____

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DEMOLITION PERMIT CHECKLIST

Please check all items on list before submitting demolition permit.

_____ Application for Johnsonburg Borough demolition permit completed.

_____ Elk County Solid Waste Authority Application for Permit to Demolish and to Remove Demolition Waste submitted and approved.

_____ Pennsylvania One Call has been contacted. Authorization Number: _____

_____ I understand that I am responsible for notifying all local utility companies to ensure that services have been disconnected from premises and disconnected from main lines prior to demolition.

_____ I understand that I am responsible for securely sealing all service utility connections and lines including storm, sanitary sewer, and water lines prior to backfilling.

_____ I understand that I am responsible for contacting the borough office in to have them inspect all securely sealed service utility connections prior to backfilling.

_____ I understand that I am responsible for public safety. Structures shall be demolished in such a manner as to avoid hazards to persons and property.

_____ I understand that I am responsible to fill and maintain to the existing grade so that no water may accumulate. Additionally, all building and structures shall be completely razed to a level of three (3) feet below existing ground and all materials removed from the site. All buried slabs to remain shall be broken up to provide drainage and prevent accumulation of water.

_____ I understand that once demolition begins, **ALL DEBRIS MUST BE REMOVED FROM THE PREMISES AND THE SITE RESTORED TO AN ORDERLY AND SANITARY CONDITION WITHIN NINETY (90) DAYS.**

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

Applicant _____ Date _____

 PLEASE NOTIFY THE BOROUGH OFFICE BEFORE START OF DEMOLITION 