### WEST CALN TOWNSHIP 721 W. Kings Highway P.O. Box 175 Wagontown, PA 19376 610 384-5643 Fax 610 384-9035

PERMIT NO. \_\_\_\_\_

#### DEMOLITION PERMIT APPLICATION

OWNER		CONTRACTOR PHONE NO			
PHONE NOADDRESS					
			ADDR	ADDRESS	
CURR	ENT USE				
APPLI	CANT/CONTACT PERSC	DN			
1. 2.	details must be signed a Two (2) copies of a prop the structure proposed (driveways, patios, pool A signed Inspection Che	ging and demolition and sealed by a lice perty sketch showing for demolition. P s, etc.), an onsite se ecklist Form	plans including the onsed engineer. g the location (includ lease note all utilite wer or well system a	dimensions of the existing stru le front, rear and side yard set ies, all existing structures, i and any established easements you with your approved permit)	back dimensions) of mpervious surfaces
Gener	al Information:				
1.	Dimensions: Width	Length	Height	Total Sq. Ft	_
2.	Material Type: Masonry/C	oncreteFra	medStone_	Other	_
3.	Are any of the following applicable? Electrical Facilities Plumbing Historically Designated Property				

4. Estimated Cost of Demolition \_\_\_\_\_

5. Proposed Method of Disposal

The following to be completed by the Codes Administration Office

I hereby certify that I have examined this application and its attachments, and find them to be in accordance with the provisions of the West CalnTownship Building Code and Zoning Ordinance.

APPROVED/DISAPPROVED\_\_\_\_\_20\_\_\_\_

Building Inspector/Codes Officer

ZONING DISTRICT	
PERMIT FEE	

TOTAL SQUARE FEET\_\_\_\_\_

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# INSPECTIONS REQUIRED FOR DEMOLITION

The issuance of this permit requires the applicant to comply with all provisions set forth in the International Code Council Building Code.

The inspections marked below are the stages when the West Caln Township Building Inspector must be notified by the applicant. Inspections must be scheduled 24 - 48 hours in advance. Failure to notify the Township before proceeding to the next step (inspection) will result in a stop work order.

Twenty-four (24) hour notice is required to cancel a scheduled inspection. Failure to do so will result in a failed inspection.

Your signature at the bottom of this page acknowledges that you have read and fully understand the requirements contained herein. Please contact the Township prior to accepting the terms of this permit with any questions or concerns.

## PRELIMINARY INSPECTION

Inspections will verify all utilities have been properly disconnected and the current location of the building demolition proposed at the time of this inspection. Safety parameters shall be established by way of barrier and or ribbon cordoning off area to prevent access to the site by unauthorized persons.

### **FINAL INSPECTION**

Inspection to verify that the entire site has been left in a clean safe environment.

I HEREBY ACKNOWLEDGE RECEIPT OF THIS FORM

Signature of Homeowner/Applicant

Date