SMITHFIELD TOWNSHIP DEMOLITION PERMIT APPLICATION

Code Enforcement Officer: Ed Habbershon - 814-643-0567. --- His hours are: Mon. & Wed. - 8:30 to 12:00 p.m.; Tues. & Thurs. - 10:00 to 2:30 p.m. & Fri. - 9:00 to 1:00 p.m.

Name & address of applicant:		
·		
Phone #: Home:		
Name & address of property owner:		
Phone #: Home:		Office:
Parcel No. of work site location#:		Location of property:
		Ome address:(Circle One)
Contractors' Name & Address:		
		·
Phone #: Office:	~	Cell #:
Name of contact person doing the world	k:	
What do you plan to do with your sewe	er line connection?	·
How many EDU's do you have now?_		

If you're not going to be doing anything in the future with this sewer line, it \underline{MUST} be capped and this procedure \underline{MUST} be inspected \underline{BEFORE} the line is covered up.

^{**}Please contact this office and notify them that you will be capping this sewer line. (814)643-6702.

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Page 2 of 2 Describe what type of work and project will be done: Is there electricity in the building now? What is the total cost of this project? Applicants signature: _____ Date submitted to Twp.:____ All applicants MUST submit the following with this application: 1. A copy of the Contractors' Liability Insurance policy showing Smithfield Township as the Certificate Holder 2. A Site Plan of the project, showing where the line will be capped or connected onto a new building. (Check with the Code Enforcement Officer to find out if the Site Plan needs to be completed by a certified engineering firm.) -----TO BE COMPLETED BY THE CODE ENFORCEMENT OFFICER-----1. Date the Code Enforcement Officer inspected the site:_____ 2. Will permitting be required by BVNA? 4. Date CEO submitted to BVNA: 5. Code Officer Signature of approval:

6. Date of completion: