

# BOROUGH OF SHENANDOAH

15 West Washington Street Shenandoah, PA 17976

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“Shenandoah Borough is an Equal Opportunity Employer and Provider”

## DEMOLITION PERMIT APPLICATION

THIS APPLICATION IS NOT AUTHORIZATION TO BEGIN DEMOLITION WORK. ANY WORK BEING DONE PRIOR TO OBTAINING A DEMOLITION PERMIT WILL RESULT IN A STOP WORK ORDER BEING ISSUED AND PROSECUTION UNDER ORDINANCE 76-16. PROOF OF WORKER’S COMPENSATION INSURANCE AND FEDERAL/STATE EIN IS NECESSARY ACCORDING TO ACT 44 OF 1993, OR WORKER’S COMPENSATION AFFIDAVIT.

Demolition Permit Number: \_\_\_\_\_ Date: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone# \_\_\_\_\_

Address: \_\_\_\_\_

Location of Permit: \_\_\_\_\_

Street Building Faces: \_\_\_\_\_

Length: \_\_\_\_\_ Width: \_\_\_\_\_ # of Stories: \_\_\_\_\_

Contractor: \_\_\_\_\_

Contractor Address: \_\_\_\_\_

Workman’s Compensation Insurance Carrier: \_\_\_\_\_

Insurance Expiration Date: \_\_\_\_\_ Contractor ID# \_\_\_\_\_

DEMOLITION COST: \_\_\_\_\_

PERMIT COST: \_\_\_\_\_ DATE: \_\_\_\_\_

**X** \_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
CODE ENFORCEMENT OFFICER

\_\_\_\_\_  
ISSUED