

BOROUGH OF SHENANDOAH

15 West Washington Street Shenandoah, PA 17976

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“Shenandoah Borough is an Equal Opportunity Employer and Provider”

Miscellaneous Permit Application

“Proposed Scope of Work must be Inspected and Approved by Fire Chief and Marshall’s before work can begin”

This application is not authorization to begin work. Proof of Worker’s Compensation Insurance and Federal/State ID# is necessary according to “Home Improvement Consumer Protection Act” (Act 132 of 2008) effective July 1, 2009 or Worker’s Compensation Affidavit.

Type of Permit: Circle Appropriate Permit

Gas Oil Burner Coal/Stoker Chimney Wood Burner Other _____

Permit Number: _____ Date: _____

Property Owner: _____ Phone # _____

Address: _____

Contractor: _____ Phone# _____

Contractor Address: _____

Workman’s Compensation Insurance Carrier: _____

Insurance Expiration Date: _____

Contractor ID# _____ Permit Fee: _____

X _____
Signature of Applicant

Issued By: _____

Fire Department Use Only

Inspection of Proposed Work:

Date: _____ Time: _____

Disposition: _____

Final Inspection:

Date: _____ Time: _____

Comments: _____

Fire Chief Signature: _____

Fire Marshall Signature: _____