

DEMOLITION PERMIT APPLICATION

Sadsbury Township – Crawford County

9888 State Highway 285, Conneaut Lake, PA 16316 • 814-382-8579

Section I: Owner/Applicant Information

OWNER'S NAME: _____ PHONE #: _____

MAILING ADDRESS _____

DEMOLITION CONTRACTOR: _____ PHONE #: _____

Section II: Property Information:

ADDRESS OF DEMOLITION: _____

STRUCTURE TO BE DEMOLISHED: _____

PARCEL #: _____ ZONING DISTRICT: _____

DATE DEMOLITION TO BEGIN: _____

Section III: Requirements:

CAUTION: No demolition work may begin without the following notifications and approvals:

- Contractor is responsible for notification to all utilities to terminate service prior to demolition, including Conneaut Lake Joint Municipal Authority (sewer), Penn Power (electric), National Fuel (gas)
- Road Bond from Township (if required)
- Compliance with DEP requirements (Asbestos Notification, Erosion & Sediment Control plan, etc)

REQUIREMENTS:

1. All material must be removed from the site
2. No open burning of materials permitted
3. Foundation shall be removed completely including footer material
4. Basement/crawlspace shall be backfilled with clean material
5. Erosion/silt fence must be installed when required
6. Security fence shall be installed when required
7. Dumpsters/trucks may not be parked or placed on street right-of-way
8. In dry weather, dust control (watering down) shall be required
9. Must notify Township Road Master 24 hours prior to beginning work. Call township office at 814-382-8579.
10. If constructing new structure in place of old, a building permit MUST be obtained PRIOR to construction.
11. Call Before You Dig – Pennsylvania One Call System – 800-242-1776

Section IV: Signature:

I, the applicant, have read and understand the requirements of this application and agree to abide by the regulations set forth above. I also understand and agree all work may be stopped if a violation exists.

Applicant's Signature

Date: _____

Section V: Review by Zoning Officer

Zoning Fee: \$25.00

Zoning Officer: _____

PAID: Ck#: _____ Cash: \$ _____ Date: _____

Paid by: _____

PERMIT # _____

Date of Issue: _____