



# Borough of Wilkinsburg Code Enforcement

Municipal Building

605 Ross Avenue

Wilkinsburg, PA 15221

Phone: (412) 244-2923 • Fax: (412) 244-2922

## DEMOLITION PERMIT APPLICATION

APPLICATION DATE: \_\_\_\_\_ PERMIT # \_\_\_\_\_

Contractor Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact Person \_\_\_\_\_ E-mail \_\_\_\_\_

Project Name \_\_\_\_\_

Site Location Address \_\_\_\_\_

PA ONE CALL SERIAL # \_\_\_\_\_ Lot & Block \_\_\_\_\_ Subdivision \_\_\_\_\_

Property Owner's Name \_\_\_\_\_ Phone # \_\_\_\_\_

(If Owner differs from Applicant)

Property Owner Address \_\_\_\_\_ E-mail \_\_\_\_\_

If Applicant differs from Property Owner, Please provide Property Owner authorization:

- Use/Occupancy**    A-1    A-2    A-3    A-4    A-5    B    E  
 F-1    F-2    H-1    H-2    H-3    H-4    H-5  
 I-1    I-2    I-3    I-4    M    R-1    R-2  
 R-3 Adult Care    R-3    R-4    S-1    S-2    U

**Description of Work:** \_\_\_\_\_

Total square feet of demolition area: \_\_\_\_\_.

Destination of demolished material: \_\_\_\_\_.

Inspection required before back-fill.   Attach dumpster permit application

**Fees** (definition TBC – to be calculated)

- |  |          |
|--|----------|
| <input type="checkbox"/> UCC fee (additional to each listed below) | \$4.00   |
| <input type="checkbox"/> Garage Demolition Permits:                | \$60.00  |
| <input type="checkbox"/> Demolition under 2,000 square feet:       | \$100.00 |

# WORKERS' COMPENSATION ADDENDUM

(Required to be attached to all building permit applications)

## Part 1

The Applicant for the permit, in compliance with Act 44 of 1993, hereby submits, (*check one*):

- Certificate of Insurance OR Certificate of Self-Insurance Listing the Borough of Wilkinsburg and our Third (Must Attach)
- Affidavit of Exemption

## Part 2

Basis and Affidavit of Exemption

- Applicant is an Individual who owns the property
- Contractor/Applicant is a sole proprietorship without employees
- Contractor/Applicant is a corporation, and the only employees working on the project have and are qualified as "Executive Employees" under Section 104 of the Worker's Compensation Act.
- All of the Contractor/Applicant's employees on the project are exempt-on religious grounds under Section 304.2 of the Worker's Compensation Act.

Other: Please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

My signature on behalf of or as the Contractor/Applicant for this permit constitutes my varication that the statements contained herein are true, and that I am subject to the penalties of 18 Pa. C.S.A. 4904 relating to unsworn falsification to authorities.

### **Applicant Signature**

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **For Office Use Only**

Permit Number \_\_\_\_\_

Fee Paid \$ \_\_\_\_\_

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_