



# Borough of Wilkesburg

## Code Enforcement

Municipal Building  
605 Ross Avenue  
Wilkesburg, PA 15221

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

### GRADING / EXCAVATION PERMIT APPLICATION

In accordance with Chapter 154 in the Borough Code of Ordinances

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

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

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

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

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

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

Lot & Block \_\_\_\_\_ Subdivision \_\_\_\_\_

(If Owner differs from Applicant)

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

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

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

#### Type of Request (Check Appropriate Box and fill-in blanks):

Grading                      Quantity of grading / excavation in cubic yards: \_\_\_\_\_

Excavation                      Source of fill material: \_\_\_\_\_

Destination of excess waste material: \_\_\_\_\_

Allegheny County Conservation District approval is required; attach approval letter.

Attach soil erosion / sedimentation control plan and storm water management plan.

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

\_\_\_\_\_

\_\_\_\_\_

PA ONE CALL SERIAL # \_\_\_\_\_

**Fees**

- \$100.00 for 500 cubic yards or less \$100.00
- \$100.00 for 500 cubic yards + \$10.00 for each additional 1,000 cubic yards or portion thereof TBC

Please print clearly. Illegible and incomplete forms will not be accepted. Please remit payment with this application. For Corporations, a form of identification of an authorized officer of the company, or copy of a written agreement of the corporation’s registered agent is required.

**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: \_\_\_\_\_