

Code.sys Code Consulting Inc.
Borough of Ellwood City

Application for a Demolition Permit

Location of Property (address) _____ Date received _____
Owners Name _____ Telephone Number _____
Address _____
City _____ State _____ Zip code _____

Description of building _____
Total Sq. Ft. of Building _____ Cost of Demolition _____

Contractor's Name _____ Telephone Number _____
Address _____
City _____ State _____ Zip code _____

I have completed the following action as required by Borough regulations for application of a demolition permit

1. I have obtained releases from all utilities stating that service has been disconnected and does not present a hazard.
2. I have given written notice to adjacent property owners if this demolition will affect their property in any way.
3. I have made arrangements with a contractor experienced in demolition or have familiarized myself with the code requirements for site conditions following the demolition of the structure.
4. I hereby authorize the above named contractor to complete this demolition on my behalf.

I hereby certify that the above information is true and correct as of (date) _____

Applicant's Signature _____ Print Name _____

For Department use only

Demolition permit approved ___ on (date) _____ by (authorized signature) _____

Demolition Permit Number _____

Demolition Permit Fee _____

Municipal Fee _____

State Fee _____ \$2.00

Total Permit Fee _____

Code.sys Code Consulting Inc.
Borough of Ellwood City

Application for a Demolition Permit
Utility Release Form

Name of Utility _____
Address _____ Telephone _____
City _____ State _____ Zip code _____

This is to certify that our (type) _____ service to the structure at
Location of Property (address) _____ has been properly
disconnected or sealed as of (date) _____ and that the proposed demolition will not
interfere with our utility connection.

Signature of Authorized Representative _____

Date _____

It is your responsibility to collect any fees or outstanding balances from the Owner listed below.

Owners Name _____ Telephone Number _____
Address _____
City _____ State _____ Zip code _____

Any questions or scheduling issues should be addressed to the contractor listed below

Contractor's Name _____ Telephone Number _____
Address _____
City _____ State _____ Zip code _____

Owner,

This form may be duplicated and should be submitted to all utilities serving the property listed
above in time for each utility to respond before demolition is to begin. (Cable, Electric, Gas,
Sewage, Telephone, Water, etc.)