

APPLICATION FOR DEMOLITION

Owner's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone No.: \_\_\_\_\_

Address of property to be demolished: \_\_\_\_\_

Contractor's Name: \_\_\_\_\_

Contractor's Mailing Address: \_\_\_\_\_

Contractor's Phone No.: \_\_\_\_\_

Insurance Company: \_\_\_\_\_

Policy No.: \_\_\_\_\_

Effective Date of Policy: \_\_\_\_\_ Expiration Date of Policy: \_\_\_\_\_

Type of Structure: \_\_\_\_\_ Number of Stories: \_\_\_\_\_

Sewer drains must be cemented in presence of the Code Enforcement Officer.  
Asbestos abatement and demolition or renovation notification.

I, hereby acknowledge receipt of a copy of Ordinance No. 7 of 2004, Sub-Section 110 and agree to demolish and raze the above described structure and fill all excavations and level land according to rules and regulations of the City of Aliquippa and the Commonwealth of Pennsylvania.

Also, burning will not be permitted without approval of the Fire Department.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The above application has been received on the \_\_\_\_\_ day of \_\_\_\_\_, 2007. This permit has been issued subject to the rules and regulations set forth in Ordinance No. 7 of 2004, Sub-Section 110. Violation of said rules and regulations are subject to penalty and revocation of the permit.

\_\_\_\_\_  
Department of Public Safety  
Code Enforcement Officer

Permit No.: \_\_\_\_\_

Fee: \$ \_\_\_\_\_

Date of Final Inspection: \_\_\_\_\_

Receipt No.: \_\_\_\_\_