Borough of Clearfield – PERMIT APPLICATION

6 S. Front Street, Clearfield, PA 16830 Phone: 814-765-7817

NT					
Tax Parcel #					
Phase:	Section:				
Phone#	_Fax#				
Email:	:				
_Phone#	_Fax#				
_Phone#	_ Fax#				
Email:					
TYPE OF WORK OR IMPROVEMENT (Circle all that apply) New Building Addition Alteration Repair Demolition Relocation Change of Use Plumbing Electrical Mechanical Other Describe the Proposed work:					
air market value)					
DESCRIPTION OF BUILDING USE (Check one then complete applicable info)					
☐ <u>NON-RESIDENTIAL</u> (Commercial)					
Specific Use					
Change of Use (indicate for	mer and proposed):				
Maximum Occupant Load:					
	-				
	Phone#Email _Phone#Email: _apply) r Demolition Relocation Mechanical Other air market value)complete applicable info) NON-RESIDENTIA				

Sprinkler system to be installed: (Check one) YesN	lo			
BUILDING DIMENSIONS					
Existing Building Area:	sq. ft.	Number of Stories:			
Proposed Building Area:					
Total Building Area:					
FLOODPLAIN INFORMATION					
Is the site located within an identified flood plan area? (Check one) YesNo					
Note: All proposed development shal		•	of the National		
Flood Insurance Program and the Per	insylvania Fl	ood Plain Management Act.			
HISTORIC DISTRICT INFORMATION					
Is the site located within a Historical I	District? (Ch	eck one) Yes No			
Note: If yes, you must provide proper Historical District certification per the UCC Law.					
The applicant certifies that all information or			•		
accordance with the "approved" constructio					
and any additional approved building code re	•				
owner and applicant assumes the responsible	=				
right of ways, flood areas, etc. Issuance of a	=				
construed as authority to violate, cancel or so	=	-			
Municipality or any other governing body. The applicable codes ordinances and regulations	= =	nereby certifies ne/sne unde	rstanus an		
applicable codes, ordinances and regulations					
Application for a permit shall be made by the	e owner or l	essee of the building or stru	cture, or		
authorized agent of either, or by the autho		_			
connection with the proposed work.	J	· ·	,		
I certify that the Code Administrator or the		•			
the authority to enter areas covered by such	n permit at a	iny reasonable hour to enfor	ce the provisions		
of the applicable codes to such permit.					
Signature of Owner or Authorized Agent	Prin	t Name of Owner or Authorized Ag	gent		
Address:		Date:			
Directions to Worksite:					
OFFICE USE ONLY below					
Provide Franck	51	C. bashiel Cl. The same of the			
Permit Fee: \$ Plan Submittal Checklist Attached: yesno					
		Review Approval Date:			
	(Page 2)				

Name of Municipality					
Name of Applicant					
Parcel#	Lot#_				
This Section below to be completed by the Authorized Municipal Representative					
CHECKLIST ITEMS					
Is the project site located in a Flo	od Area? (Check one)	yes	no		
(Circle one)	Residential Project	or	Commercial Project		
Description of Work:				-	
Zoning or Land Use Permit	Approved		Not applicable	_	
Stormwater Management	Approved		Not applicable	_	
Street cut/ Driveway	Approved		Not applicable	_	
Sewage/Onlot Permit	Approved		Not applicable	_	
Water Permit	Approved		Not applicable	_	
PennDot Highway Occupancy	Approved		Not applicable	_	
Floodplain Permit	Approved		Not applicable	_	
Other	Approved		Not applicable	_	
I certify that all required Municipathereby is granted to issue the re		d Regul	ations have been met ar	nd approval	
Authorized Municipal Representa	tive signature:				
Date:					

MUNICIPAL PRIOR APPROVAL CHECKLIST

^{**}NOTE THAT THIS PERMIT APPLICATION PACKAGE MUST BE COMPLETED AND THEN SUBMITTED WITH THE PROJECT CONSTRUCTION PLANS AND THE CORRESPONDING SUBMITTAL CHECKLIST**

Borough of Clearfield

Demolition Procedures and Certification Affidavit

- I am completing and submitting the City of DuBois Permit Application
- I am responsible for notifying all adjoining neighbors of the demolition project (One week in advance)
- Pennsylvania on call has been contacted (800-242-1776). Authorization Number
- I am responsible for public safety and will take every necessary precaution
- I am responsible for contacting the local municipality in order to inspect all disconnects and capping of all service utility connections and lines in accordance with local jurisdiction requirements including sewer and/or water lines <u>Prior to backfilling</u>.
- I am responsible for complying with proper DEP waste material disposal procedures
- I am responsible for contacting DEP (www.dep.state.pa.us) for all commercial demolition projects and for all controlled burn projects. (A minimum of 10 days advance notice is required prior to commencement of demolition).
- I am responsible for to fill and maintain the finished site grade so water will not pond or create a public safety nuisance.
- I am responsible for notifying all local utility companies to ensure that services have been disconnected from premises and disconnected from main lines.(For example: Penelec, United Electric, National Fuel, ect.) Prior to commencing demolition.

I have read, understand and agree to conform to the above statements and I attest that all information given is truthful. I acknowledge that I may face punishment and/or penalties if I violate any of the above certifications.

Signature of applicant:	Date:
	pplication has been made for a PA UCC Demolition Permit olish this property or act as my/our agent in the demolition
Signature of Property Owner:	Date:
Signature of Property Owner:	Date:
Signature of	
Authorized Office Personnel:	Date:
YOU MUST CAA TO SCHEDULE AN INSPECTION TH	E FIRST DAY OF THE PROJECT
THIS COMPLETED FORM MUST BE SUBMITTED WI	TH PERMIT APPLICATION

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A PHOTOGRAPH OF THE STRUCTURE(S) TO BE DEMOLISHED MUST BE SUBMITTED

Borough of Clearfield

NOTICE TO ALL CONTRACTORS:

YOU MUST CONTACT PA. ONE CALL BEFORE YOU COMMENCE ANY EXCAVATION ACTIVITY.

- YOU ARE SOLEY RESPONSIBLE TO CALL
 1-800-242-1776 TO NOTIFY ALL UTILITY COMPANIES
 OF YOUR CONSTRUCTION PROJECT.
 - FAILURE TO GIVE PROPER NOTICE MAY RESULT IN YOU ACCEPTING ALL LIABILITY DAMAGES AND CONSEQUENCES.