

IV. IDENTIFICATION – TO BE COMPLETED BY ALL APPLICANTS

	NAME	MAILING ADDRESS NO., STREET, CITY & STATE	ZIP CODE	PHONE NO.
1. Owner or Lessee				
2. Contractor			License/HIC No.	
3. Architect or Engineer				

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of this jurisdiction.

Signature of Applicant	Address	Application date
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DO NOT WRITE BELOW THIS LINE

V. PLAN REVIEW RECORD – For office use by Code Enforcement Officer

VI. REMARKS:

PERMITS ARE GOOD FOR SIX (6) MONTHS FROM DATE OF ISSUE. IT IS THE APPLICANT'S RESPONSIBILITY TO SCHEDULE INSPECTIONS AND NOTIFY THE CODE ENFORCEMENT OFFICER WHEN WORK IS COMPLETE.

VII. VALIDATION

Building Permit Number _____

Building Permit Issued _____

Building Permit Fee \$ _____

Approved by: _____

RECAP OF COSTS

Permit (Borough) \$ _____

Inspection Fees (P.I.A.) \$ _____

(Building _____ Plan Review _____ Energy _____ Plumbing _____ Electrical _____)

Other _____

State Permit Fee \$ 4.00 _____

Total Due \$ _____

Borough \$ _____ P.I.A. \$ _____

Ck. # _____ Cash _____ Ck. # _____ Cash _____

Date Rec'd. _____ Date Rec'd. _____

Code Enforcement Officer