

# BOROUGH OF SAXONBURG



## Demolition Permit Application

### APPLICANT INFORMATION

Applicant's Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number \_\_\_\_\_

### DESCRIPTION OF DEMOLITION ACTIVITY

Property Owner's Name \_\_\_\_\_

Address (where demolition is taking place) \_\_\_\_\_

Tax Map Parcel ID Number \_\_\_\_\_

Type of Structure Being Demolished (check one):

- Single Family       Storage Building       Detached Garage  
 Multi-Family Building       Non-Residential Building

Property Owner's Signature \_\_\_\_\_ Date \_\_\_\_\_

Borough Approval Signature \_\_\_\_\_ Date \_\_\_\_\_

Fee \$ \_\_\_\_\_ Method of Payment:  Cash  Check / Number \_\_\_\_\_