

ASSOCIATED APPLICATIONS

Case # _____
 Case # _____
 Case # _____
 Case # _____
 Project _____



DEMOLITION RELEASE FORM

TO BE SUBMITTED WITH A BUILDING PERMIT APPLICATION WHEN RAZING A BUILDING OR STRUCTURE

PLEASE PRINT LEGIBLY AND FILL OUT FORM COMPLETELY

DATE RECEIVED: _____

PROPERTY ADDRESS: _____ APPLICATION DATE: _____

APPLICANT NAME: _____ PHONE: (____) _____

APPLICANT ADDRESS: _____ FAX/CELL: _____

CITY: _____ STATE: _____ ZIP CODE: _____ EMAIL: _____

An application is hereby made for a permit for construction as indicated herein and which shall be located as shown on the plot plan submitted herewith and/or to use the premises for the purpose herein described. Applicant agrees that such work will comply with all provisions of the Zoning Ordinance, Building Code, with all deed restrictions and with all other applicable Ordinances of South Whitehall Township.

APPLICANT PRINTED NAME AND SIGNATURE: _____

IF THIS APPLICATION IS NOT BY THE PROPERTY OWNER, THEN BY WHAT AUTHORITY: _____

CONTRACTOR NAME: _____ PHONE: (____) _____

CONTRACTOR ADDRESS: _____ FAX/CELL: _____

CITY: _____ STATE: _____ ZIP CODE: _____ EMAIL: _____

PROPERTY OWNER NAME: _____ PHONE: (____) _____

OWNER ADDRESS: _____ FAX/CELL: _____

CITY: _____ STATE: _____ ZIP CODE: _____ EMAIL: _____

CURRENT USE OF BUILDING:

- | | |
|--|--|
| <input type="checkbox"/> One Family Dwelling | <input type="checkbox"/> High Hazard |
| <input type="checkbox"/> Two Family Dwelling | <input type="checkbox"/> Institutional |
| <input type="checkbox"/> Place of Assembly | <input type="checkbox"/> Mercantile (Store) |
| <input type="checkbox"/> Business (Office) | <input type="checkbox"/> Multi-Family Dwelling |
| <input type="checkbox"/> Educational | <input type="checkbox"/> Storage |
| <input type="checkbox"/> Factory or Industrial | <input type="checkbox"/> Utility and Misc. |

Type of Construction: _____

Total Square Footage: _____

Dimensions of Building: _____

Number of Stories: _____

Dimensions of Lot: _____

Date of Demolition: _____

ONE CALL Serial #: _____

Date of ONE CALL: _____

Insurance Carrier: _____ Policy Number: _____

Sewer Disconnect: Public Private _____ Water Disconnect: Public Private _____

UTILITIES RELEASED (SIGNATURES REQUIRED):

Signature	Printed Name
SWT PWD: _____	_____
PPL: _____	_____
UGI: _____	_____
Verizon: _____	_____
Service Electric: _____	_____
RCN: _____	_____

ADJOINING PROPERTY OWNERS (SIGNATURES REQUIRED):

Signature	Printed Name and Address
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

APPROVAL CONDITIONS:

BUILDING INSPECTOR APPROVAL: _____ TITLE: _____ DATE: _____

CONTACT INFORMATION

SWT PWD (South Whitehall Township Public Works Department)

Submit a copy of the Demolition Release to the Public Works Department – Phone # 610-398-0401

PPL

Must contact Customer Service at **1-800-DIAL-PPL (342-5775)** and request a work order in South Whitehall Township, Lehigh County.

UGI UTILITIES, INC.

Contact: Sheila Rodriguez, Utility Support Representative
UGI Utilities, Inc. 2121 City Line Road, Bethlehem, PA 18017
Desk: 610.807.3745 | Cell: 484.256.0372
srodriguez1@ugi.com
(If not available call 610-866-0951)

VERIZON

Call 1-800-837-4966

SERVICE ELECTRIC CABLE TV

Call General Contruction department at phone #**610-868-0902**. Or email form to **construction@sectv.com**.

ASTOUND (RCN) CABLE TV

Call 1-800-746-4726