

HAZLE TOWNSHIP BUILDING DEPT.

MAIL Address: P.O. BOX 506
HARLEIGH, PA 18225-0506

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Delivery Address: 101 W. 27th St., Hazleton, PA 18202

BUILDING AND ZONING PERMITS

APPLICATION

REPAIRS, MINOR ALTERATIONS & SIGNS

ZONING DISTRICT: (Dept. Use Only)

BUILDING PERMIT #:A (Dept. Use Only)

LOCATION OF PROPOSED WORK OR IMPROVEMENT

COUNTY: LUZERNE

MUNICIPALITY: HAZLE TOWNSHIP

SITE ADDRESS:

OWNER: E-Mail:

MAILING ADDRESS:

City State Zip

PHONE #: Work: Home: FAX:

All contractors & sub-contractors must have either a PAOAGHC or a Hazle Township License.

PRINCIPAL CONTRACTOR: Lic. #

CONTRACTOR'S ADDRESS: E-Mail:

City State Zip

PHONE #: Work: Home: FAX:

SUB-CONTRACTORS NAME: Lic. #

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(Add Additional Sheet IF Necessary)

TYPE OF WORK OR IMPROVEMENT (Check One)

- checkbox New Building checkbox Addition checkbox Alteration checkbox Repair checkbox Demolition checkbox Relocation checkbox Sign
checkbox Other checkbox ZONING PERMIT only checkbox Change of Use checkbox Foundation Only checkbox Plumbing checkbox Mechanical
checkbox Electrical

Describe the proposed work:

CONSTRUCTION

COST: \$ _____ **Attach Signed Contract**
(reasonable fair market value = Labor & Material)

WHEN WILL WORK BEGIN: _____ END: _____

PLOT PLAN ATTACHED: YES NO

SETBACKS: FRONT _____ SIDE(L) _____ SIDE(R) _____ REAR _____

BUILDING PLANS (Attached): YES NO N/A

WILL THERE BE ANY DEMOLITION OR CONSTRUCTION WASTE MATERIALS??????? (Shingles, wood, glass, asbestos, brick, concrete, soil, etc.) YES NO If **YES**, what is/are the material(s) and the location where it will be disposed and Disposal Contractors

Name: _____

Disposal Location: _____

WILL THERE BE WATER RUNOFF? YES NO If YES, Explain where it will go and how it will be controlled: _____

MECHANICAL: Indicate Type of Heating/Ventilating/Air Conditioning (i.e., electric, gas, oil, etc.) _____

DESCRIPTION OF BUILDING USE (Check One)

RESIDENTIAL

NON-RESIDENTIAL

One-Family Dwelling (R-3)

Specific Use: _____

Two-Family Dwelling (R-3)

Use Group: _____

SIGNS: COMMERCIAL&/INDUSTRIAL

NUMBER: _____ (Attach Sign Drawings and Plot Plan Showing Locations of Each)

SIZE: ① _____ sq.ft _____ L(ft.) X _____ H(ft.) # sides 1 2

② _____ sq.ft _____ L(ft.) X _____ H(ft.) # sides 1 2

③ _____ sq.ft _____ L(ft.) X _____ H(ft.) # sides 1 2

HISTORIC DISTRICT N/A

Is the site located within a Historic District: YES NO

If construction is proposed within a Historic District, a certificate of appropriateness may be required by the Municipality.

The applicant certifies that all information on this application is correct and the work will be completed in accordance with the approved construction documents and PA Act 45 (Uniform Construction Code) and any

