



# Borough of Ligonier

## Application for a Demolition Permit

Tax Map # 16 - \_\_\_ - \_\_\_ - 0 - \_\_\_

Zoning District: \_\_\_\_\_

Street Address of Property in Borough: \_\_\_\_\_

**1. Identification/Background:** complete all lines as appropriate

	Name	Street Address	City, Town, Zip	Phone & Fax
<b>Applicant</b>				
<b>Land Owner</b>				
<b>Business Owner</b>				
<b>Contractor</b>				

**Demolition Information**

**Demolition fee = \$50.00**

Date of Demolition \_\_\_\_\_  
 Contractor Name, Address and Phone number \_\_\_\_\_

Liability Insurance: Policy Number \_\_\_\_\_ Insurance Company \_\_\_\_\_

Will there be any off-property effects, i.e., need for street blockage? \_\_\_\_\_

Describe any impacts the activity will have on neighboring property \_\_\_\_\_

Permit, when issued, must be posted on the property to be demolished prior to demolition. The Zoning Officer must be notified when demolition is completed, or if ANY changes are made to this information.

**Verifications and Certifications**

I declare that all information submitted with this application is true and correct to the best of my knowledge and belief. I agree to comply with the provisions of all applicable ordinances of the Borough of Ligonier. If I am acting on behalf of others, I certify that I have the authority. I understand that the statements herein are made subject to the penalties of 18 PA. Cons. Statutes Section 4904 relating to unsworn falsification to authorities.

<b>Signature of Applicant/Agent</b>	<b>Date</b>	<b>Signature of Contractor (for Section 8)</b>	<b>Date</b>