

**PENNSBURY TOWNSHIP**

**702 Baltimore Pike, Chadds Ford, PA 19317**

**Phone: 610-388-7323 Fax: 610-388-6036**

**Email: Manager@pennsbury.pa.us**

Office Use Only	
Permit #:	_____
Date Received:	_____
Fee:	_____ Paid: _____

**DEMOLITION PERMIT APPLICATION**  
**(Residential & Commercial)**

**Property Owner:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone/Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Property Address: \_\_\_\_\_ Subdivision: \_\_\_\_\_

Tax Parcel or UPI #: \_\_\_\_\_ Zoning District: \_\_\_\_\_

Historic Structure:                      Yes                      No

**Contractor:** \_\_\_\_\_ PA License #: \_\_\_\_\_

Address: \_\_\_\_\_

Phone/Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**Architect/Engineer:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone/Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**Property Use:**

**Property: Residential**

One Family	Two or more family <i>Enter # of Units</i> _____	Transient hotel, motel, or dormitory <i>Enter # of Units</i> _____
Garage	Carport	Other: _____

**Property: Commercial**

Amusement, recreational	Church, other religious	Industrial
Parking garage	Service Station, repair garage	Hospital, institutional
Office, bank, professional	Public utility	School, library, other educational
Stores, mercantile	Tanks, towers	Other: _____

**Cost of Demolition:** \_\_\_\_\_

**Selected Characteristics of Building:**

**Principal Type of Frame:**

Masonry (wall bearing)	Wood frame	Structural Steel
Reinforced concrete	Other: _____	

**Principal Type of Heating Fuel:**

Gas	Oil	Electricity
Coal	Other: _____	

**Type of Sewage Disposal:**

Public or Private company	Private (septic tank)
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**Type of Water Supply:**

Public or Private company	Private (well)
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**Type of Mechanical:**

Central air conditioning	Yes	No
Elevator	Yes	No

**Dimensions:**

Number of Stories	_____
Total square feet of floor area, all floors, based on exterior dimensions	_____
Total land area, sq ft	_____

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 the authorized agent and we agree to conform to all applicable ordinances of Pennsbury Township.

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_