

WEST WYOMING BOROUGH
BUILDING DEPARTMENT
464 West 8th Street
West Wyoming, PA 18644
Phone (570) 693-1311 Fax (570) 693-4028

BUILDING PERMIT APPLICATION

DATE: _____

PROPERTY IDENTIFICATION

BUSINESS NAME OR PROPERTY OWNER'S LAST NAME: _____

CONSTRUCTION ADDRESS: _____ PIN #: _____

(PIN is listed on your property tax bill issued by Luzerne County)

PROPERTY OWNER INFORMATION

NAME: _____

ADDRESS: _____ PHONE #: _____

CITY, STATE, ZIP: _____ FAX #: _____

Tenant Name and Phone# _____

CONTRACTOR INFORMATION

BUSINESS NAME: _____ PHONE #: _____

CONTACT NAME: _____ CELL #: _____

ADDRESS: _____ FAX #: _____

CITY, STATE, ZIP _____ E-MAIL: _____

LICENSE HOLDER'S NAME: _____ PA LICENSE #: _____

ALL CONTRACTORS MUST SUBMIT A COPY OF THEIR CERTIFICATE OF INSURANCE WITH THIS APPLICATION

Present use of Property: Residential _____ Commercial _____

Construction Type: _____ Use Group: _____

Does this project involve Earth disturbance of one acre or more as defined by:

PA Title 25 Chapter 182? YES _____ NO _____

If YES, documentation of NPDES Permit approval must be submitted with this application for a building permit.

ARCHITECT/ENGINEER INFORMATION (if applicable)

NAME: _____ PHONE #: _____

ADDRESS: _____ FAX #: _____

CITY, STATE, ZIP: _____ PA LICENSE #: _____

TYPE OF WORK BEING PERFORMED: NEW ADDITION REPAIR ALTERATION REPLACEMENT

CURRENT USE OF STRUCTURE: RESIDENTIAL BUSINESS STORAGE ASSEMBLY IS

THIS A CHANGE OF USE? NO YES

COST OF JOB:	BUILDING	\$ _____
	ELECTRIC	\$ _____
	PLUMBING	\$ _____
	MECHANICAL	\$ _____
	OTHER	\$ _____
	TOTAL COST	\$ _____

GENERAL DESCRIPTION OF WORK TO BE DONE: _____

****BOTH OWNER AND CONTRACTOR MUST SIGN APPLICATION****

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standard of all laws regulating construction in this jurisdiction.

OWNER'S AFFIDAVIT: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

WARNING TO OWNERS: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

NEW CONSTRUCTION, STRUCTURAL ALTERATIONS AND/OR ADDITIONS:

•You must attach three (3) copies of plans and specifications and proof of construction cost, ie. Signed contract for work or receipts for material when work is performed by the owner.

ZONING APPROVAL:

•Zoning approval is required to be submitted for new construction, addition, decks, porches, patios, sunrooms, fences and swimming pools.

SEWER PERMIT:

•Sewer Permit is required to be submitted for all new construction projects.

CERTIFICATION:

I hereby certify that I am the property owner, equitable owner or authorized agent of the owner for the property and project listed in this application. I further certify that all work will be performed in accordance with the Pennsylvania Uniform Construction Code, the attached plans and specifications, and all other applicable laws and regulations. Finally, I agree that the Building Code Official shall have the authority to enter the property and building described in this permit at reasonable hours to inspect the premises and enforce provisions of the Code and this Permit.

Date: _____ Applicant Signature _____

REVIEW and INSPECTION:

•Review and inspection of the construction process is required to assume Code compliance.

The following are the minimum inspection approval requirements for new construction.

1. Footing – After excavation and any forming PRIOR to concrete pour.
2. Foundation – After construction, prior to backfill, complete with foundation drains, damp proofing and embedded anchor bolts and BEFORE any framing, including sill plate.
3. Framing – After construction, PRIOR to insulation and interior wall covering, plumbing, electrical, etc. shall be “roughed in”.
4. Installation and Wallboard – Prior to wallboard installation, R-Values in exterior walls, ceiling and floors, if required must be verified.
5. Final – After structural completion, with all fixtures and devices complete and functional.

To schedule an Inspection, Call BIU Pennsylvania

Building Inspection Underwriters of Pennsylvania, Inc.

Code Enforcement and Consulting Services

1010 Albright Ave. Scranton PA 18508

Dave Williams – BCO #1679

dwilliams@biuinc.com

Building Code Official

Ph# 570-344-9681

Fax# 570-969-9700

Toll Free – 866-344-9681

Please provide advance notice of 48 hours for required inspections.

Thomas F. Craig

1271 Wyoming Avenue Forty

Fort, PA 18704

Ph# 570-287-8586 Option 2 - 2

Fax# 570-287-0503

Mobile# 570-331-1814

(For office use only)

_____ **Proof of Liability insurance with the Borough of West Wyoming listed as the certificate-holder**

_____ **Proof of Workers' Compensation Insurance or Exemption**

_____ **Copy of local Business Tax Receipt (from the City the business is based in)**

_____ **State license verified (when required)**

Permit Number: _____

Permit Fee: _____

Issued Date: _____

Administrative Fee: _____

Permit Fee: _____

Penalty: _____

Authorized By:

State Fee: _____

Total: _____

Code Enforcement Officer