



DEMOLITION APPLICATION

Borough of Ambler

131 Rosemary Ave • Ambler, PA 19002

215-646-1000 x112 Fax 215-641-1355

Email: code@borough.ambler.pa.us

PERMIT NO. _____

DATE ISSUED _____

PARCEL # _____

A. IDENTIFICATION

Owner _____

Contractor _____

CERTIFICATION IN LIEU OF OATH:

Address _____

Address _____

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his agent.

Tel. () _____

Tel. () _____

Agent Signature

Work Site Address _____

PA State Registration No. _____

Parcel # _____

All contractors and sub-contractors must be registered with the State. When changing contractors notify this office in writing.

B. TECHNICAL SITE DATA

Check One: RESIDENTIAL _____ COMMERCIAL/INDUSTRIAL/INSTITUTIONAL/OTHER _____

Check One: Primary Structure _____ Portion of Structure _____ Accessory Structure _____ Interior Demo _____

Cost of Construction: \$ _____

Description of Work Being Demolished:

CHECKLIST FOR REQUIRED SHUT-OFF LETTER:

WATER _____

SEWER _____

ELECTRIC _____

Total Building Area _____ Sq. Ft.

Height of Structure _____ Ft.

Comments _____

Permit Fees \$ _____

Approval _____ Date _____