

APPLICATION FOR DEMOLITION PERMIT



CITY OF PHILADELPHIA
DEPARTMENT OF LICENSES AND INSPECTIONS
MUNICIPAL SERVICES BUILDING – CONCOURSE
1401 JOHN F. KENNEDY BOULEVARD
PHILADELPHIA, PA 19102
For more information visit us at www.phila.gov

APPLICATION # _____

(Please complete all information below and print clearly)

ADDRESS OF PROPOSED DEMOLITION: _____

APPLICANT:

COMPANY NAME: _____

PHONE # _____ FAX # _____

APPLICANT'S ADDRESS: _____

LICENSE # _____ E-MAIL: _____

PROPERTY OWNER'S NAME:

PHONE # _____ FAX # _____

PROPERTY OWNER'S ADDRESS: _____

ARCHITECT/ENGINEER IN RESPONSIBLE CHARGE:

ARCHITECT/ENGINEERING FIRM: _____

PHONE # _____ FAX # _____

ARCHITECT/ENGINEERING FIRM ADDRESS: _____

LICENSE # _____ E-MAIL: _____

DEMOLITION CONTRACTOR:

PHONE # _____ FAX # _____

CONTRACTING COMPANY ADDRESS: _____

LICENSE # _____ E-MAIL: _____

SITE SAFETY MANAGER:

PHONE # _____ E-MAIL: _____

DEMOLITION SUPERVISOR:

PHONE # _____ E-MAIL: _____

LAST USE OF BUILDING/SPACE:

- RESIDENTIAL (ONE OR TWO FAMILY) OTHER: _____
 RESIDENTIAL (THREE FAMILY)

ESTIMATED COST OF WORK

\$ _____

BRIEF DESCRIPTION OF WORK: _____

NO. OF STORIES: _____ HEIGHT : _____ feet DEMOLITION AREA (GFA): _____ square feet

VIOLATIONS:

- Property has been declared to be in **imminent danger (ID)** of failure or collapse, by the City of Philadelphia Department of Licenses & Inspections, in reference to PM-110. **VIOLATION #:** _____
- Property has been declared to be **unsafe (U)** to human life or the public welfare, by the City of Philadelphia Department of Licenses & Inspections, in reference to PM-108. **VIOLATION #:** _____

PRE-REQUISITE APPROVALS FOR:

ADDRESS: _____ APPLICATION #: _____

AGENCY	INITIALS	DATE	REMARKS
HISTORICAL COMMISSION ROOM 576 – CITY HALL			
STREETS DEPARTMENT ROOM 940 – M.S.B.			
WATER DEPARTMENT (STORMWATER MANAGEMENT APPROVAL) – 1101 MARKET STREET, 2ND FLOOR			
WATER DEPARTMENT (WATER SERVICE DISCONTINUANCE) – CONCOURSE LEVEL, M.S.B			

MANDATORY CHECKLIST ITEMS:

<input type="checkbox"/>	Photographs of the structure and site, accurately depicting present condition
<input type="checkbox"/>	Site Safety Demolition Plan (3 copies required) – In accordance with Section ‘A-301.5’ of the Philadelphia Code.
<input type="checkbox"/>	Site Plan (3 copies required) – In accordance with Section ‘A-301.5’ of the Philadelphia Code.

SELECT CHECKLIST ITEMS:

Must be denoted as ‘PROVIDED’ OR ‘NOT APPLICABLE’ (N/A)	PROVIDED	N/A
Plumbing Permit for sealing of sewer lateral	<input type="checkbox"/>	<input type="checkbox"/>
Demolition Schedule – In accordance with Section ‘A-301.5’ of the Philadelphia Code.	<input type="checkbox"/>	<input type="checkbox"/>
Statement of Special Inspections & Special Inspections Agreement – In accordance with Section ‘B-1704’ of the Philadelphia Code.	<input type="checkbox"/>	<input type="checkbox"/>
Dust Control Plan – approved by Air Management Services for buildings greater than 6 stories.		
Asbestos Inspection Report – In accordance with Section ‘A-302’ of the Philadelphia Code.	<input type="checkbox"/>	<input type="checkbox"/>

All provisions of the building code and other City ordinances will be complied with, whether specified herein or not. Plans approved by the Department form a part of this application. I hereby certify that the statements contained herein are true and correct to the best of my knowledge and belief. I understand that if I knowingly make any false statement herein I am subject to such penalties as may be prescribed by law or ordinance.

If the application is made by a person other than the owner without the owner's signature, it shall be accompanied by an affidavit of the owner to the effect that the proposed work is authorized by the owner and that the applicant is authorized to make the demolition permit application.

APPLICANT'S SIGNATURE: _____ DATE: ____/____/____

BUILDING OWNER'S SIGNATURE: _____ DATE: ____/____/____