

# INDEPENDENCE TOWNSHIP

## DEMOLITION PERMIT APPLICATION PACKET

NOTICE! NEWLY UPDATED NPDES PERMIT REGS ON LAST PAGE OF PACKET



~ DEMOLITION ~

### Uniform Construction Code Act 45 of 1999

Administered by  
**Code.sys Code Consulting, Inc.**  
For the Township of Independence

Municipal Office 724-378-3739 Hours 8-4, M-F

Contact information for our inspectors if you need  
Additional information or to schedule inspections:

#### **Code.sys™** Code Consulting, Inc.

Joanna Beres  
*Building Inspector*  
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1-877-821-0337 Ext. 27      321 Grant Avenue  
Toll Free      Pittsburgh, PA 15209  
[www.code-sys.com](http://www.code-sys.com)      412-821-0337, ext. 27

#### **Code.sys™** Code Consulting, Inc.

John T. Lucchesi  
*Electrical Inspector*

1-877-821-0337 Ext. 55      321 Grant Avenue  
Toll Free      Pittsburgh, PA 15209  
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# **CONSTRUCTION DRAWINGS REQUIREMENTS AND DEMOLITION PERMIT GUIDELINES**

## **DRAWINGS**

- Please provide location of dwelling(s) which are being removed from the premises. Please include property lines and where on the lot the existing dwellings which are being demolished are located.
- Identify the type and location of site utilities such as gas, electric, water, cable, telephone, etc. on the plan.
- Identify if any underground storage tanks (combustible and flammable liquids) are present on the property.

## **GUIDELINES**

The following information must be submitted or addressed prior to issuance of a demolition permit

- Permit application and required fee submitted
- Site plan submitted with above information including on the same
- Asbestos shall be removed in accordance with PA Department of Environmental Protection Asbestos Removal Requirements
- Onlot wells to be abandoned shall have the pump removed; the shaft filled with clean stone and permanently capped 12 inches below finished grade
- Onlot septic systems (1) all tanks must be pumped, (2) all associated piping must be removed and properly disposed of, and (3) all tanks must be removed and properly disposed of or abandoned in place with holes punched in the tank bottom and filled with clean fill
- All excavations outside the street right of way must be filled with suitable uncontaminated material and installed to meet structural fill requirements if the area will be bearing surface for below or above ground structures or buildings
- Indicate whether demolition waste materials will be disposed of onsite or offsite. Only uncontaminated soil, rock, stone, gravel, concrete, brick, concrete block debris may remain onsite. All demolition materials removed from the site must be disposed of at an approved facility/site
- Future construction (if applicable) requires backfilling with approved engineered fill or excavation to virgin soil
- Notify PA One Call at 800-242-1776 at least 3 days prior to start of demolition or excavation
- No methods of demolition will be permitted which will not insure all phases of such demolition being strictly confined within the limits of the demolition areas, and without hazard to adjacent properties or to the public
- Explosives may not be used to demolish any unit of structure
- Under no circumstances shall any structure be set afire unless under the direct supervision of the Independence Volunteer Fire Department for training purposes

- All buildings shall be completely razed. All floor construction over basements shall be removed; interior basement partitions and pieces of solid masonry construction shall be completely removed. All basement, cellar or foundation walls shall be completely removed
- Masonry basement floors may be cracked and left as part of the backfill if they are more than 18 inches below ground level
- All basement partitions, furnaces, heating apparatus, piping, gasoline or oil tanks, miscellaneous fixtures and stairways shall be removed from the area of condemnation
- All requirements of the International Building Code pertaining to demolition must be complied with.

**CALL BEFORE YOU DIG!**

PENNSYLVANIA LAW REQUIRES

3 WORKING DAYS NOTICE FOR

CONSTRUCTION PHASE AND 10 WORKING  
DAYS IN DESIGN STAGE—STOP CALL

**Pennsylvania One Call System, Inc.**

**1-800-242-1776**



# DEMOLITION PERMIT APPLICATION

DATE APPLICATION RECEIVED: \_\_\_\_\_

LOCATION OF PROPERTY: \_\_\_\_\_

LOT & BLOCK OR PARCEL NUMBER: \_\_\_\_\_

SUBDIVISION: \_\_\_\_\_

MUNICIPALITY: \_\_\_\_\_ COUNTY: \_\_\_\_\_

OWNER NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_

## DEMOLITION PERMIT

DESCRIPTION OF DEMOLITION: \_\_\_\_\_

TOTAL SQ. FT. OF DEMOLITION: \_\_\_\_\_ EST. COST OF DEMOLITION: \_\_\_\_\_

CONTRACTOR NAME: \_\_\_\_\_ (INSERT "SELF" IF YOU ARE THE CONTRACTOR)

DBA: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT

**X**

\_\_\_\_\_  
APPLICANT/AGENT SIGNATURE

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
DATE

### \*\*\*\*FOR DEPARTMENT USE ONLY\*\*\*\*

DEMOLITION PERMIT APPLICATION ☐ APPROVED ☐ DENIED

DEMOLITION PERMIT FEE \$ \_\_\_\_\_

BY: \_\_\_\_\_

MUNICIPAL FEE \$ \_\_\_\_\_

DATE: \_\_\_\_\_

TRAINING FEE \$ \_\_\_\_\_

PERMIT NO.: \_\_\_\_\_

TOTAL PERMIT FEE \$ \_\_\_\_\_

REASON(S) FOR DENIAL: \_\_\_\_\_

\_\_\_\_\_

# WORKER'S COMPENSATION ADDENDUM

LOCATION OF PROPERTY: \_\_\_\_\_

LOT & BLOCK OR PARCEL NUMBER: \_\_\_\_\_

MUNICIPALITY: \_\_\_\_\_ COUNTY: \_\_\_\_\_

## PART I

The Applicant for the Building Permit, in compliance with Act 44 of 1993, hereby submits (check one):

- ☐ Certificate of Insurance OR Certificate of Self-Insurance (please attach)
- ☐ Affidavit of Exemption

## PART 11

Basis for exemption (check one):

- ☐ Applicant is an individual who owns the property
- ☐ Contractor/Applicant is sole proprietorship without employees
- ☐ Contractor/Applicant is a corporation, and the only employees working on the project have and are qualified as "Executive Employees" under Section 104 of the Workers' Compensation Act.

Please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- ☐ All of the Contractor/Applicant's employees on the project are exempt on religious grounds under Section 304.2 of the Workers' Compensation Act.

Please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- ☐ Other:

Please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*My signature on behalf of or as the contractor/applicant for this building permit constitutes my verification that the statements contained here are true, and that I am subject to the penalty of 18 Pa. C.S.A. §4904 relating to un-sworn falsifications to authorities.*

Signature: **X** \_\_\_\_\_ Title: \_\_\_\_\_

1. Any subcontractors used on this project will be required to carry their own workers' compensation coverage.
2. The applicant is not permitted to employ any individual to perform work on this project pursuant to the permit in violation of the Act.
3. Violation of the Workers' Compensation Act or the terms of this permit will subject the applicant to a stop-work order and other fines and penalties provided by law.

# OSHA SAFETY STANDARDS SIGNOFF

LOCATION OF PROPERTY: \_\_\_\_\_

LOT & BLOCK OR PARCEL NUMBER: \_\_\_\_\_

MUNICIPALITY: \_\_\_\_\_ COUNTY: \_\_\_\_\_

**I AM FULLY AWARE OF THE U.S. DEPARTMENT OF LABOR,  
OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION  
(OSHA) STANDARDS AND UNDERSTAND THAT I MUST  
COMPLY WITH THESE STANDARDS FOR THE DURATION OF  
MY CONSTRUCTION PROJECT.**

**X**

\_\_\_\_\_  
SIGNATURE OF APPLICANT/OWNER

\_\_\_\_\_  
DATE