

Borough of Clifton Heights
30 S. Springfield Road
Clifton Heights, PA 19018
610-623-3223 Fax 610-284-1461

Class: _____

Present Bldg: _____

New Bldg- Alt- Repairs: _____

Permit Fee: _____ Permit # _____ Date Issued: _____

APPLICATION FOR PERMIT

I (We) hereby apply for a permit to construct the following work (give exact location):

Property Address: _____

Dimensions of Lot: _____

Distance of bldg. from Property Line: _____ Side: _____ Side: _____

Front Line: _____ Rear Line: _____

Give definite particulars as to work proposed and materials used:

Estimated Cost (All Trades): _____ Time of Commencing: _____

Notwithstanding the Issuance of this permit, all provisions of the Building and Zoning Codes will be complied with, whether specified herein or not.

Owner: _____ Address: _____ Phone: _____

Contractor: _____ Address: _____ Phone: _____

Applicant: _____ Address: _____ Phone: _____

Date: _____ Signature: _____

(Owner or contractor)