

# Moscow Borough Building Permit Application

123 VanBrunt St.

Moscow, Pa 18444

Phone: (570) 842-1699 Fax: (570) 842-0499

Application No. \_\_\_\_\_

Date: \_\_\_\_\_

Site Address: \_\_\_\_\_ Tax Parcel # \_\_\_\_\_

Lot # \_\_\_\_\_ Subdivision/Land Development: \_\_\_\_\_

Owner: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Cell: \_\_\_\_\_

Principal Contractor: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Cell: \_\_\_\_\_

Architect: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Cell: \_\_\_\_\_

Insurance Carrier: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Policy No: \_\_\_\_\_

## Type of Work or Improvement (check one)

- |  |  |                                     |                                     |                                     |                                     |
|--|--|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> New Building    | <input type="checkbox"/> Addition      | <input type="checkbox"/> Alteration | <input type="checkbox"/> Repair     | <input type="checkbox"/> Demolition | <input type="checkbox"/> Relocation |
| <input type="checkbox"/> Foundation Only | <input type="checkbox"/> Change of Use | <input type="checkbox"/> Plumbing   | <input type="checkbox"/> Mechanical | <input type="checkbox"/> Electrical |                                     |

Describe the proposed work: \_\_\_\_\_

Estimated Cost of Construction (reasonable fair market value) \$ \_\_\_\_\_

## Description of Building Use (check one)

### RESIDENTIAL

- |  |       |
|--|-------|
| <input type="checkbox"/> One-Family Dwelling | (R-3) |
| <input type="checkbox"/> Two-Family Dwelling | (R-3) |
| <input type="checkbox"/> Multi-Family        | (R-2) |
| <input type="checkbox"/> Hotels              | (R-1) |

### NON-RESIDENTIAL

Specific Use: \_\_\_\_\_  
Use Group: \_\_\_\_\_  
Change in Use: ☐ Yes ☐ No  
If YES, Indicate Former: \_\_\_\_\_  
Maximum Occupancy Load: \_\_\_\_\_  
Maximum Live Load: \_\_\_\_\_

## Building/Site Characteristics

Number of Residential Dwelling Units: \_\_\_\_\_ Existing, \_\_\_\_\_ Proposed  
Mechanical: Indicate Type of Heating/Ventilation/Air Conditioning (ie. Electric, gas, oil, etc.) \_\_\_\_\_  
Water Service: (check) ☐ Public ☐ Private  
Sewer Service: (check) ☐ Public ☐ Private (Septic Permit # \_\_\_\_\_)

## Does or will your building contain any of the following:

Fireplace(s): \_\_\_\_\_ Type of Fuel \_\_\_\_\_ BTU's \_\_\_\_\_ Type Vent \_\_\_\_\_  
Elevator/Escalators/Lifts/Moving walks: (check) ☐ Yes ☐ No  
Sprinkler System: ☐ Yes ☐ No  
Pressure Vessels: ☐ Yes ☐ No  
Refrigeration Systems: ☐ Yes ☐ No



## Building Dimensions

Existing Building Area: \_\_\_\_\_ sq. ft.

Proposed Building Area: \_\_\_\_\_ sq. ft.

Total Building Area: \_\_\_\_\_ sq. ft.

Number of Stories: \_\_\_\_\_

Height of Structure Above Grade: \_\_\_\_\_ ft.

Area of the Largest Floor: \_\_\_\_\_ sq. ft.

## Floodplain

Is the site located within an identified flood prone area? (check one) ( ) Yes ( ) No

Will any portion of the flood prone area be developed? (check one) ( ) Yes ( ) No

Owner/Agent shall verify that any proposed construction activity complies with the requirements of the National Flood Insurance Program and the Pennsylvania Flood Plain Management Act (Act 166-1978), specifically *Section 60.3 (d)*.

## Historic District

Is this site located within a Historic District? ( ) Yes ( ) No

If any construction is within a Historic District, the municipality may require a certificate of appropriateness.

The applicant certifies that all information on this application is correct and the work will be completed in accordance with the "approved" construction documents and PA Act 45 (Uniform Construction Code) and any additional approved building code requirements adopted by the Municipality. The property owner and applicant assumes the responsibility of locating all property lines, setback lines, easements, rights-of way, flood areas, etc. Issuance of a permit and approval of construction documents shall not be construed as authority to violate, cancel or set aside any provisions of the does or ordinances of the Municipality or any other governing body. The applicant certifies he/she understands all the applicable codes, ordinances, and regulations.

Application for a permit shall be made by the *owner* or lessee of the building or structure, or *agent* of either, or by the registered design professional employed in connection with the proposed work.

**I certify that the code administrator or the code administrator's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.**

\_\_\_\_\_  
Signature of Owner or Authorized Agent

\_\_\_\_\_  
Print Name of Owner or Authorized Agent

\_\_\_\_\_  
Address

\_\_\_\_\_  
Date

STATE OF PENNSYLVANIA

COUNTY OF LACKAWANNA

}  
S.S.:

\_\_\_\_\_, being duly sworn according to law says that he is the owner or duly authorized representative of the owner of the land described and is familiar with the matters of the fact above set forth, and the same are true and correct and that the structure above described will be erected or altered in accordance with all existing laws and Ordinances applicable to same in case this application is approved.

Sworn to and subscribed before me this

\_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_  
Year

\_\_\_\_\_  
Notary Public

My Commission expires \_\_\_\_\_

Building Permit

( ) Approved \_\_\_\_\_ (date)

( ) Denied \_\_\_\_\_ (date)

Reason: \_\_\_\_\_