

# HAZLE TOWNSHIP SUPERVISORS

P.O. BOX 506

HARLEIGH, PA 18225-0506

ZONING 570 455-2030

SUPERVISORS 570 455-2039

CODE ENFORCEMENT 570 455-2030

FAX 570 453-2402

FAX 570 455-6184

FAX 570 453-2402

Delivery Address: 101 W. 27<sup>th</sup> St., Hazleton, PA 18202

## DEMOLITION PERMIT

PERMIT NO.: D- \_\_\_\_\_ - \_\_\_\_\_ DATE: \_\_\_\_\_

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

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

PHONE NO.: \_\_\_\_\_

PERMISSION IS HEREBY GIVEN TO THE ABOVE APPLICANT TO DEMOLISH A  
STRUCTURE LOCATED AT:

\_\_\_\_\_  
\_\_\_\_\_

CONTRACTORS NAME: \_\_\_\_\_

NOTE: ALL CONTRACTORS MUST HAVE A CURRENT CONTRACTORS PERMIT.  
ALL CONTRACTORS MUST HAVE WORKERS COMPENSATION COVERAGE  
CERTIFICATE AND FEDERAL OR STATE IDENTIFICATION NUMBER (EIN) ON  
FILE WITH THE TOWNSHIP.

NOTE 2: ***ALL COMMERCIAL OR PRIOR COMMERCIAL STRUCTURES MUST FILL  
OUT AND FILE AN "ASBESTOS ABATEMENT AND DEMOLITION/  
RENOVATION NOTIFICATION FORM (LIBI-600) TO THE PROPER AGENCY***

INDICATE WHERE ALL DEMOLITION MATERIALS WILL BE DEPOSITED

\_\_\_\_\_

I certify that all of the above is true and correct and I have read the above notices and will  
comply with all State and Federal Regulations as indicated:

\_\_\_\_\_

APPLICANT

FEE: \$ \_\_\_\_\_

INCLUDES \$4.00 State Fee

Cash \_\_\_\_\_ CH# \_\_\_\_\_

\$129.00 OVER \$5000.00 VALUE

\$24.00 UNDER \$5000.00

VALUE OR IF IT IS AN  
ACCESSORY BUILDING.

\_\_\_\_\_  
ZONING/PERMITS OFFICER

\_\_\_\_\_

DATE