



Wyoming Borough
 www.wyomingpa.org
 277 WYOMING AVENUE, WYOMING, PA 18644

OFFICE (570) 693-0291

FAX (570) 613-9192

UCC PERMIT APPLICATION

IMPORTANT INFORMATION:

- No work shall be started prior to the issuance of the UCC permit.
- Completion and submission of this application does not guarantee or constitute permit issuance.
- **Residential:** Allow 15 days for review. **Commercial:** Allow 30 days for review.
- A signed copy of the signed contract must be submitted.
- **New construction, additions, decks/porches and structural alterations:** Submit three (3) copies of required plans/drawings and one (1) copy of required construction specifications

CONSTRUCTION ADDRESS: _____

OWNER: _____	CONTRACTOR: _____
ADDRESS: _____	ADDRESS: _____
PHONE: _____	PHONE: _____
EMAIL: _____	EMAIL: _____

DESIGN PROFESSIONAL: _____

ADDRESS: _____

PHONE: _____ **EMAIL:** _____

TYPE OF PERMIT: 1 OR 2 FAMILY DWELLING / TOWNHOUSE COMMERCIAL

PRESENT USE OF PROPERTY: _____

DESCRIPTION OF REQUEST (ATTACH ADDITIONAL NARRATIVE AS NEEDED): _____

VALUE OF CONSTRUCTION: \$ _____ *Building Valuation Data will be used to verify actual construction costs.*

I hereby certify that the information provided on this application is true and correct, that any necessary zoning, land development or other approvals have been granted and I/we agree to conform to all applicable laws of the Borough of Wyoming and Pennsylvania Uniform Construction Code (PA-UCC). I further agree that the Building Code Official and all assigned code inspectors shall have the authority to enter the property and building described in this permit to inspect the premises and enforce the provisions of PA-UCC and this permit.

APPLICANT'S SIGNATURE: _____ **DATE:** _____

NAME: _____ **ADDRESS:** _____

(Being the person making the above application on behalf and with the full authority of the owner.)

OFFICE USE ONLY

DATE RECEIVED: _____ PLAN REVIEW: _____ PERMIT #: _____ OFFICER: _____

FLOOD MAP ZONE DESIGNATION: _____ PR FEE: \$ _____ PERMIT FEE: \$ _____ UCC FEE: \$ _____ TOTAL: \$ _____