

ROARING SPRING BOROUGH

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Roaring Spring, PA 16673
(814) 224-4814
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BOROUGH CHECKLIST

DATE: _____ PERMIT NUMBER: _____
PLANNED IMPROVEMENT OF PROPERTY AT: _____

DEED #: _____ TAX I. D. #: _____
DESCRIPTION OF IMPROVEMENT: _____

OWNER: _____

	NAME	ADDRESS	PHONE
CONTRACTOR:	_____	_____	_____

	NAME	ADDRESS	PHONE
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CONTRACTOR FEDERAL STATE I. D. NUMBER

TYPE OF IMPROVEMENT		CONSTRUCTION		SWIMMING POOL	
RESIDENTIAL	_____	STORIES:	_____	PUBLIC	_____
COMMERCIAL	_____	FRAME	_____	PRIVATE	_____
INDUSTRIAL	_____	MASONRY	_____		
INSTITUTION	_____	METAL CLAD	_____		
OTHER	_____	OTHER	_____		
UTILITIES (PUBLIC)	BORO WATER _____	GARAGE		SIDEWALK	_____
	BORO SEWER _____	ATTACHED	_____	CURBING	_____
UTILITIES (PRIVATE)	ELECTRIC _____	SEPERATED	_____		
	TELEPHONE _____	CARPORT	_____		
	GAS _____	OTHER	_____		
		UTILITIES:	ABOVE GROUND _____		
			BELOW GROUND _____		

ZONING DESIGNATION: _____

LOT SIZE: WIDTH _____ DEPTH: _____

CONSTRUCTION COST: \$ _____

REMARKS: _____

SET BACKS

FRONT: _____

REAR: _____

SIDE: _____

PROOF OF WORKERS' COMPENSATION RECEIVED:

YES	NO

AFFIDAVIT FOR RESIDENT EXEMPTION OF WORKERS' COMPENSATION RECEIVED:

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DATE OF PERMIT ISSUED: _____ APPROVED DISAPPROVED

SIGNATURE OF APPLICANT: _____

BOROUGH SECRETARY SIGNATURE

DATE

