



Borough of Mars
 598 Spring Ave. - Mars, Pa. 16046
 Ph: (724) 625-1858
 Fax: (724) 625-4065

Demolition Permit Application - Boro

Date: _____	Address of proposed work: _____ _____ Parcel ID of Property: _____
Applicant Name: _____	
Address: _____ _____	
Ph: _____ Fax: _____	
E-Mail: _____	

Proposed demolition (explain in detail) _____

Total Square Footage: Basement: _____ 1st _____ 2nd _____

Contractor Information

Contractor Name: _____
 Address: _____
 Phone: _____ Fax: _____
 Worker's Compensation Policy No.: _____
 Insurer: _____
 Expiration No.: _____

Note, A permit will not be issued until a copy of the worker's compensation insurance certificate is submitted indicating Borough of Mars as the certificate holder.

All permits required by the Commonwealth of Pennsylvania Department of Labor & Industry including Highway Occupancy Permits shall be obtained by and are the responsibility of the applicant. The applicant shall be responsible for identification of all utilities prior to excavation.

The undersigned hereby acknowledges that the above information and attached documents and drawings are true and accurate and that the permit requirements have been read and understood.

Applicant Signature: _____ Print _____ Date _____

Building Owner's Signature: _____ Print _____ Date _____

Borough Use: Date Received _____ / _____ / _____	Initials _____
Date Approved: _____ / _____ / _____	Date Denied: _____ / _____ / _____

MAKE ALL CHECKS PAYABLE TO THE BOROUGH OF MARS
MAIL TO PO BOX 395, MARS, PA 16046-0395

Residential Building Demolition Permit Instructions & Checklist

- The Building Demolition Permit application has been completed in full and signed by both applicant & owner.
- The attached "Worker's Compensation Affidavit" has been completed.
- The Required Inspections sheet has been read and signed. (Borough will identify required inspections)
- Pennsylvania One Call shall be notified prior to any excavation. 1 800 242-1776

Worker's Compensation Affidavit

The applicant for the Building Permit, in compliance with Act 44 of 1993, hereby submits the following Information and Affidavit. One of the following requirements must be marked:

- A current *Certificate of Insurance* indicating Worker's Compensation is attached. The certificate must indicate *Mars Borough* as the holder.
- If the permit applicant or indicated contractor qualifies as "Exempt from Worker's Compensation. Please indicate the reason for the exemption by checking on of the following and completing the subsequent information:
 - The Contractor/applicant is the owner of the property.
 - Contractor/Applicant is a Sole Proprietor without employees.
 - All of the contractor/applicants employees on the project are exempt on religious grounds under Section 304.2 of the Act. Please explain in detail:

 - Contractor/Applicant is a corporation, and the only employees working on the project have and are qualified as "Executive Employees" under Section 104 of the Act. Explain the status of any/or all workers on the project:

Complete the following:

Date: _____
Name of Applicant/Contractor: _____
Address: _____
City _____ State _____ Zip Code _____

1. Any subcontractors used on this project will be required to carry their own worker's compensation coverage.
2. The applicant is not permitted to employ any individual to perform work on this project pursuant to the permit in violation of the Act.
3. Violation of the Worker's Compensation Act or the terms of this permit will subject the applicant to a stop-work order and other fines and penalties provided by law.

Signature: _____ Print Name _____
Company: _____ Title: _____

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Required Inspections
Contact Richard Mannas to schedule inspections
412-629-0111

The following periodic inspections (marked ✓) are required to ensure compliance with the Building Permit you have been issued. All inspections shall be requested no sooner than 48 hours before the inspection is required. A FINAL INSPECTION IS REQUIRED FOR ALL BUILDING PERMITS.

- BACKFILL: Prior to any backfill.
- MECHANICAL: All Gas lines must be properly removed and capped at curb box
- FINAL PLUMBING: All fixtures shall be installed and fully functional.
- FINAL MECHENICAL: All Sewer lines must be properly sealed
- FINAL INSPECTION: All Grounds must be properly landscaped and seeded.
- OTHER _____: Where in the opinion of the Building Official a special inspection is required.

Work shall not proceed until the above inspections are approved by the Building Official. Failure to obtain any of the above inspections may result in penalties in accordance with the local ordinance.

Signature: _____ Print: _____ Date: _____

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