

# CECIL TOWNSHIP DEMOLITION PERMIT APPLICATION

Application is hereby made for a Demolition Permit under the Cecil Township Ordinance;

(PLEASE PRINT IN INK OR TYPE)

- 1) Applicants Name: \_\_\_\_\_ Phone Number: (\_\_\_\_) \_\_\_\_\_  
(Property owner)
- Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
- 2) The structure was used as: \_\_\_\_\_
- 3) Estimated cost of Demolition \$ \_\_\_\_\_ Estimated Square Feet: \_\_\_\_\_
- 4) Structure to be demolished is located at:  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: PA Zip: \_\_\_\_\_  
 Tax ID No. 140- \_\_\_\_\_ Lot No. \_\_\_\_\_ Plan Name: \_\_\_\_\_
- 5) Contractors Name: \_\_\_\_\_ Phone Number: (\_\_\_\_) \_\_\_\_\_
- 6) How will demolition be done: \_\_\_\_\_

6) Will other properties be affected by demolition?  Yes  No

Distance from structure to be demolished to surrounding structures: (in feet)

Front \_\_\_\_\_ Rear \_\_\_\_\_ Left Side \_\_\_\_\_ Right Side \_\_\_\_\_

7) If controls to protect other properties are required, how will they be accomplished: \_\_\_\_\_

### NOTICE

THE APPLICANT AGREES TO COMPLY WITH THE PROVISIONS OF ALL LAWS AND ORDINANCES RELATING TO ZONING AND BUILDING IN CECIL TOWNSHIP. THE APPLICANT HEREBY CERTIFIES THAT THE FACTS AND REPRESENTATIONS PRESENTED IN THIS APPLICATION AND ACCOMPANYING DOCUMENTS ARE TRUE AND ACCURATE TO THE BEST OF HIS/HER KNOWLEDGE, AND AGREES THAT ALL OFFICIAL NOTICES MAY BE MAILED TO HIM/HER AT THE ADDRESS ABOVE.

IT IS UNDERSTOOD AND AGREED THAT UPON COMPLETION OF DEMOLITION; NOTICE SHALL BE GIVEN TO THE CECIL TOWNSHIP ZONING OFFICE. IT IS ALSO AGREED THAT THE PROPERTY OWNER IS FULLY RESPONSIBLE FOR ANY AND ALL DAMAGE WHICH MAY OCCURE TO ADJACENT PROPERTIES. DURING DEMOLITION AND THE PROPERTY OWNER HAS FULLY REVEILED ALL INFORMATION OF THE STRUCTURE AND SURROUNDING PROPERTIES TO THE BEST OF THEIR KNOWLEDGE.

ACCORDING TO THE CECIL TOWNSHIP ZONING ORDINANCE, NO PERMIT FOR THE ERECTION, RAZING, CHANGE, ALTERATION, OR REMOVAL OF BUILDINGS SHALL BE VALID OR EFFECTIVE AFTER THREE (3) MONTHS FROM THE DATE OF ISSUANCE THEROF AND SHALL THEREAFTER BE VOID. ONCE WORK IS INITIATED UNDER A VALID PERMIT, THE PERMIT SHALL BE VALID FOR A PERIOD OF ONE (1) YEAR FROM THE DATE OF ISSUANCE, AS LONG AS CONSTRUCTION IS DILIGENTLY PERSUED.

Signature of property owner: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of person filling out application: \_\_\_\_\_ Date: \_\_\_\_\_  
(If different from property owner)

### FOR TOWNSHIP USE ONLY

PERMIT NUMBER: _____	
Permit Fee: _____ Special Fees: <u>dt 400</u> Total Cost: _____ Receipt No: _____	Conditions/ Comments: <div style="border: 1px solid black; height: 60px; margin-top: 5px;"></div>
<input type="checkbox"/> Approved <input type="checkbox"/> Denied      Zoning Officer _____ Date: _____	
Date of demolition completion: _____ Inspector: _____	