McMillen Engineering, Inc. 115 Wayland Smith Drive Uniontown, PA 15401	Job Number	For Office Use Only Received by: Date:
724-439-8110 Phone 724-439-4733 Fax	Permit Number	Amount Paid: Check #
ι	JNIFORM CONSTRUCTION DEMOLITION PERMIT A	
Location of Proposed Demo	lition	
Street Address L	ot # City	Municipality
Tax Map # Directions to property:		Lot Size
Owner/Applicant Information	1	
Name	Daytime Phone #	
Mailing Address	City	State Zip
Description of building or st	ructure to be demolished	(include use and number of stories.
Demolition Contractor Inform	nation	
Name	Phone	e #
		State Zip (residential does not require a site plan) the completed Application and Demolition
<ul><li>and distances to sidewa</li><li>2. Size and location of any</li><li>3. Area to be filled to existi</li></ul>	lks, pavement and curbs whe	b be demolished, distances to property lines here they abut property lines: ures that will remain on the site: be fenced and otherwise protected in
<ol> <li>Location, dimensions an of the International Build</li> </ol>	d construction details for pe ling Code.	edestrian protections required in section 3306
inspector to perform an asbesto concentrations and recommend	nated contractor shall engages s survey of said structure. T standard mitigation measu	ge at their own cost, an AHERA building This survey shall identify areas of asbestos Ires. All materials suspected to be or used of in accordance with all local, state, and