

# West Finley Township

401 Beham Ridge Road 724-484-9200 (office)  
West Alexander, PA 15376 724-484-7566 (fax)  
[westfinleypa@gmail.com](mailto:westfinleypa@gmail.com)

Permit #: \_\_\_\_\_ Date: \_\_\_\_\_

Paid: \_\_\_\_\_ by \_\_\_\_\_

## REMOVAL/DEMOLITION PERMIT APPLICATION

**Directions:** Please complete the following and submit to the township office. Include a **\$50 fee** (cash or check payable to **West Finley Township**). Any incomplete form will be returned to the applicant. The permit will be reviewed by the Building Inspector for approval. The township office will then contact the applicant.

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Check One:  Property Owner

Agent for Property Owner

If Agent, please list contact name and number below:  
\_\_\_\_\_

If the applicant is an Agent for the Property Owner, please list the following information. Also, note that a letter of authorization from the owner is required for this option and must be submitted at the time of application.

Property Owner: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Parcel Number: 680 - \_\_\_\_\_

Full Description of Removal: \_\_\_\_\_

Date of Removal/Demolition: \_\_\_\_\_

**Location Details:** If no physical address exists for the proposed removal, please provide a detailed description of the exact location of the structure to be removed.

\_\_\_\_\_  
\_\_\_\_\_

Detailed Method of Removal/Demolition: \_\_\_\_\_

**Tax Information:** Please note that this application will be registered with the Washington County Tax Assessment Office. Additional fees may apply for unpaid and/or delinquent taxes.

### Attestation of Applicant:

By signing below, the applicant agrees to comply with the provisions of all the laws and ordinances regulating building construction and building removal in West Finley Township. The applicant certifies that the facts stated in this application are true and correct and agrees that official notices may be mailed to him/her at the provided address. It is understood and agreed that **upon completion of permitted removal, notice shall be given to the official issuing this permit.** All permits must be submitted to the county for recording and tax purposes.

\_\_\_\_\_  
Signature of Applicant

Approved: \_\_\_\_\_

David D. Martin, Building Code Enforcement Officer

\_\_\_\_\_  
Date