Borough of Collingdale APPLICATION FOR ALTERATIONS – LEVEL 1 PERMIT

Applicant Information	Applicant Name:		
	Address:		
	City:	State:	Zip Code:
	. ,	PHONE	y 105
Site Information	Facility Name:	* Sa.	2
AMAVA MAMEAVAA	Street Number and Name:		
	City:	State:	Zip Code:
		PHONE	
Fees	\$25.00 for each additional Inspections	1st \$1,000 of Cost: onal \$1,000 of Cost: oa\$60.00 per: tate Fee:	
		Total Fee:	
requirements four	nd in the IEBC and on the Build	til to confirm that the work meets ing Codes Website <u>www.dli.state</u> ecessary, and attach the sheet to the	.pa.us/codes). Carry over
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