



Borough of Collingdale

APPLICATION FOR ALTERATIONS - LEVEL 1 PERMIT

Applicant Information

Applicant Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ - _____ - _____

Site Information

Facility Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ - _____ - _____

Project Data:

Describe the proposed alteration in sufficient detail to confirm that the work meets the Level-1 scope requirements found in the IEBC and on the Building Codes Website: www.dli.state.pa.us/codes if necessary, an additional description sheet may be attached to this application.

*****Below is for Official Use Only: *****

Fees:

Estimated Construction Cost: \$ _____

Base Fee of \$60.00 for 1st \$1,000.00 of Cost: \$ _____

\$30.00 for each additional \$1,000.00 of Cost: \$ _____

Inspections @ \$80.00 per permit: \$ _____

State Fee: \$ _____ \$4.50 _____

Total Fee: \$ _____

Date: _____ Amount: \$ _____ Approved by: _____

Cash: _____ Check#: _____ Bank Name: _____