



515 MILLERS RUN ROAD  
MORGAN, PA 15064  
412-221-8700  
FAX # 412-221-7798

**BUILDING PERMIT APPLICATION**  
**NO. \_\_\_\_\_**

Type of Permit: \_\_\_\_\_ Market Value: \_\_\_\_\_

Location of Construction: \_\_\_\_\_

\_\_\_\_\_

Lot Number \_\_\_\_\_

Owner's Name and Address: \_\_\_\_\_

Phone No: \_\_\_\_\_

Contractor's Name and Address: \_\_\_\_\_

Phone No: \_\_\_\_\_

\_\_\_\_\_

Architect's Name and Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

WHAT KIND OF OUTSIDE WALLS: Frame  Brick  Split Face Block   
Siding  Stone  Stucco

\_\_\_\_\_  
(How many stories?)

\_\_\_\_\_  
(Will there be a basement?)

\_\_\_\_\_  
(Approx. Outside Dimension?)

Kind of Heating \_\_\_\_\_ Kind of Flooring \_\_\_\_\_

Kind of Roofing \_\_\_\_\_ Kind of Foundation \_\_\_\_\_

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

Signature of Zoning Officer: \_\_\_\_\_

Date: \_\_\_\_\_

**NOTE: THIS BUILDING PERMIT EXPIRES ON \_\_\_\_\_**