## **City of Franklin**

430 Thirteenth Street Franklin, PA 16323-1317 Phone: 814.437.1430

Fax: 814.437.1119

Municipal Permit #	
Fee \$	

Date \_\_\_\_\_

## APPLICATION FOR MUNICIPAL PERMIT

## **LOCATION OF PROPOSED WORK:** Number and Street Map or Tax ID#\_\_\_\_\_ Historic District YES NO (circle one) Flood Zone: YES NO (circle one) Description of Building Use TYPE AND DESCRIPTION OF WORK Circle One: **Describe Work:** 1. Roof 2. Siding 3. Repair 4. Replacement 5. Sign 6. Fence 7. Shed/Garage 8. Windows 9. Doors 10.Other: Continue on back if needed Estimated Cost of Construction: \$ **IDENTIFICATION** Mailing Address Phone 1. Applicant 2. Tenant 3. Owner Contractor The applicant certifies and affirms that all the information on this application is true and correct to the best of applicant's information, knowledge and belief. The applicant and/or property owner assumes the responsibility for locating all property lines, set backs, easements, rights-of-way, flood

areas, etc. The applicant understands that all approved construction work must be completed in accordance with approved documents and building

code requirements of the City of Franklin. The applicant is the owner or authorized agent of the property described here within.

Signature \_\_\_\_\_

