

Borough of Collingdale
APPLICATION FOR ALTERATIONS – LEVEL 1 PERMIT

Applicant Information	Applicant Name: _____
	Address: _____
	City: _____ State: _____ Zip Code: _____
	PHONE: _____

Site Information	Facility Name: _____
	Street Number and Name: _____
	City: _____ State: _____ Zip Code: _____
	PHONE: _____

Fees	Estimated Construction Cost: _____
	Base Fee of \$50.00 for 1 st \$1,000 of Cost: _____
	\$25.00 for each additional \$1,000 of Cost: _____
	Additional Inspections @\$60.00 per: _____
	\$4.00 State Fee: _____
	Total Fee: _____

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. Carry over this description to an addition sheet of paper, if necessary, and attach the sheet to this application.

Approved by: _____	Date: _____
Amount Paid: _____	Check #: _____