WEST BRADFORD TOWNSHIP
1385 CAMPUS DRIVE
DOWNINGTOWN, PA 19335
Phone (610) 269-4174
Fax (610) 269-3016

Permit _____

APPLICATION FOR FIRE PREVENTION PERMIT

1. PROPERTY INFORMATION

Street Address	Apt.	Zip	Parcel Number 50-	Zoning District
Subdivision		Lot Number	Parcel Use □ Residential □Commercial	

2. OWNER INFORMATION

Last Name	First Name	Phone
Street	City, State, Zip	
Cell Phone	Fax Number	

3. CONTRACTOR INFORMATION

Last Name	First Name	Phone
Street	City, State, Zip	
Cell Phone	Fax Number	

4. FIRE PREVENTION PERMIT APPLICATION

Improvement Type:	Proposed Uses:
□ New Construction □ Demolition □ Addition □ Alteration □ Temporary Structure	□ Assembly □ Factory □ Residential □ Business □ Institutional □ Storage □ Educational □ Mercantile □ Other _____
	Project Estimated Value $

I hereby certify that I am the owner of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit per PA UCC Act 45 of 1999.

_____

Signature of Applicant Address Contact #

_____

Print Name

DEPARTMENT APPROVALS	Fee
Plan Examiner _____ Date	
Fire Marshal _____ Date	