Borough of Jim Thorpe
115 East 10th Street
Jim Thorpe, PA 18229
570-325-3025 / Fax: 570-325-8154

Submit To: Borough of Jim Thorpe
All fees payable to Borough of Jim Thorpe

Please Print Clearly Date: _____

Work Site Address: _____
(Street) (City) (State) (Zip)

Property Owner: _____ Phone: _____

Email: _____

Mailing Address: _____
(Street) (City) (State) (Zip)

Third-Party Inspection Agency: _____ Phone: _____

Email: _____

Third-Party Agency Address: _____
(Street) (City) (State) (Zip)

Contractor: _____ Phone: _____

Email: _____

Contractor Address: _____
(Street) (City) (State) (Zip)

TYPE OF WORK (Please check either "Residential" or "Non-Residential" below and provide all information requested):

___ Residential Project Description: _____ Cost: _____

New building square footage (excluding garage) _____ Finished basement square footage: _____
(all floors) (if applicable)

___ Non-Residential Project Description: _____ Cost: _____

Check One: _____ New Building _____ Existing Building New building square footage _____
(all floors)

I hereby certify that the proposed work is authorized by the owner of record and that I am, or have been, authorized to make application as his/her authorized agent and agree to conform to all applicable laws of the jurisdiction.

_____ _____ _____

(Print Name) (Signature) (Date)

OFFICIAL USE ONLY

Date Received: _____ Fees Paid: Residential: _____ Cash/Check: _____

Non-Residential: _____ Cash/Check: _____