

HOMESTEAD BOROUGH 221 East Seventh Avenue Homestead, PA 15120

Phone: (412) 461-1340 Fax: (412) 461-4057

SIDEWALK PERMIT

APPLICANT INFORMATION					
Name of Applicant:				Email:	
Contact Person:					
Address:					
City: S					
	Jiale		LIIIaII.		
CONTRACTOR INFORMATION					
Name:				Email:	
Contact Person:				Phone: ()	
Address:				Fax: ()	
City: S	State:	Zip Code:	Email:		
LOCATION INFORMATION					
			_		
Property Address:			Parce	IID:	·
NAME OF STREET(S) where work will take pla	ace (include	cross streets):			
Type of sidewalk: ☐ Concrete ☐ Expos	sed aggregat	e □ Brick □	Other type	e:	
			,,		
· ·		n of sidewalk:			
All work must be done in accordance with the O the Homestead Borough (412-461-1340) a min and wire mesh is installed according to borougl	nimum of 24 h	nours before wearing su	ırface is inst	alled to verify that	at subbase type/depth
barricades and and/or safety lighting if area is r				. •	·
	Appli	cant name (print):			
Date of application:	Appli	cant signature:			
FEE SCHEDULE					
Unite OF Lineal Fact					
Up to 25 Lineal Feet					\$75.00
Each additional Lineal foot				\$5.00 each	*
•				\$5.00 each	\$
Each additional Lineal foot				\$5.00 each	\$
Each additional Lineal foot Scanning Document Storage Fees	(EOD DO	DOUGH USE ON	IV)	\$5.00 each	\$ \$8.00
Each additional Lineal foot Scanning Document Storage Fees	(FOR BO	ROUGH USE ON	LY)	\$5.00 each	\$ \$8.00
Each additional Lineal foot Scanning Document Storage Fees TOTAL OF ALL FEES			LY)		\$ \$8.00
Each additional Lineal foot Scanning Document Storage Fees		ROUGH USE ON	LY)		\$ \$8.00
Each additional Lineal foot Scanning Document Storage Fees TOTAL OF ALL FEES			LY)		\$ \$8.00
Each additional Lineal foot Scanning Document Storage Fees TOTAL OF ALL FEES Permit No	Invoice	e No	LY)	Check No.	\$8.00
Each additional Lineal foot Scanning Document Storage Fees TOTAL OF ALL FEES	Invoice	e No	LY)	Check No.	\$ \$8.00

