



Somerset Borough Building Inspections

P.O. Box 71, 347 West Union Street

Somerset, PA 15501-0071

Office: (814) 445-5595 * Fax: (814) 445-3931

www.somersetborough.com



Application for SIDEWALK PERMIT

OFFICE USE

Zoning District: _____ Map No.: _____

Parcel No.: _____ Lot Size: _____

Application Number: Z - _____

Permit Number: SW - _____

Permit Fee: _____

Date Paid: _____

Fees: New - \$35.00 Includes Application Fee

Replacement - \$10.00

Owners Name: _____

Phone No.: _____

Owners Address: _____

Type of Sidewalk

A _____ New or _____ replacement Concrete walk.

B _____ New or _____ replacement Asphalt walk.

C _____ Asphalt overlay of existing walk.

D _____ Temporary Repair

Length: _____

Width: _____

Work must start within 30 days and be completed within 60 days or permit issuance.

Read construction standards carefully. Keep inspector advised of your construction schedule.

Large dotted box for sketch plan.

Draw sketch plan below. Please identify streets and structures.

Print Applicant/Owner

Signature of Applicant/Owner

Date

Signature of Building Codes Officer

Date

Notes: _____

For more information regarding building permits/zoning visit our website: www.somersetborough.com