



Bureau Veritas North America, Inc.

Borough of Jim Thorpe Building Permit Application

Submit to: Borough of Jim Thorpe

101 East 10th St., Jim Thorpe, PA 18229

570-325-3025/Fax: 570-325-8154

FOR PROJECTS UTILIZING BUREAU VERITAS FOR UCC CODES

- Complete the Bureau Veritas Building Permit Application
- This form along with three sets of plans must be submitted to the above address
- Plans submitted for the construction of a commercial project must be Stamped
by an Engineer/Architect registered in the State of Pennsylvania
- Commercial demolition requires approval from the DEP

FULL PAYMENT IS REQUIRED PRIOR TO THE PERMIT BEING ISSUED

ALL FEES ARE TO BE PAID DIRECTLY TO BUREAU VERITAS

Revised 7/29/20

Bureau Veritas North America, Inc.

ED Government Center Way, Suite 101
Pocahontas, PA 18350

Phone: (570) 894-2800
Fax: (570) 894-2806
www.us.bureauveritas.com

Borough of Jim Thorpe Permit Application

Submit to: Borough of Jim Thorpe

101 East 10th St., Jim Thorpe, PA 18229

Please Print

Municipality: _____ Date: _____

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

Property Owner: _____ Phone: _____

Email: _____

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

Contractor: _____ Phone: _____

Email: _____

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

On Site Contact: _____ Phone: _____

Person responsible for permit Fees: _____ Phone: _____

Email: _____

TYPE OF WORK (Please check either "Residential" or "Commercial" below and provide all information requested):☐ Residential Project Description: _____ Cost: \$ _____New building square footage (excluding garage) _____ Finished basement square footage: _____
(all floors) (if applicable)☐ Commercial 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)

OFFICE USE ONLY

Use Group: _____ Construction Type: _____ Occupancy Load: _____ Code Edition: _____

Plan Review Date: _____ APPROVED _____ NOT APPROVED

Plan Reviewer: _____ Permit Fee: \$ _____ State Fee: \$4.50 Total Due: \$ _____

Permit #: _____ TMS #: _____