

**Luzerne Borough**  
**144 Academy St. Luzerne, Pa 18709**  
**Application for Building Permit**  
**Phone: (570) 287-7633**  
**Fax: (570) 287-7842**

Date: \_\_\_\_\_

Description of Work: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name & Address of Owner: \_\_\_\_\_

\_\_\_\_\_

Phone #: \_\_\_\_\_

Contractors Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ License #: \_\_\_\_\_

Location of Job: \_\_\_\_\_

**Cost of Construction**

Building: \_\_\_\_\_ Building: \_\_\_\_\_

Plumbing: \_\_\_\_\_ Plumbing: \_\_\_\_\_

Electrical: \_\_\_\_\_ Electrical: \_\_\_\_\_

HVAC: \_\_\_\_\_ HVAC: \_\_\_\_\_

Demolition: \_\_\_\_\_ Demolition: \_\_\_\_\_

Total Estimated Cost: \_\_\_\_\_ Total Estimated Cost: \_\_\_\_\_

\_\_\_\_\_

Signature of Applicant

Date: \_\_\_\_\_ Action or Status \_\_\_\_\_ Signature \_\_\_\_\_

\_\_\_\_\_

