



# APPLICATION FOR DRIVEWAY PERMIT

Revised 08/03/2018

## City of Warren Building Code Department

318 West Third Avenue - Warren, PA 16365  
Phone (814)723-6300 - Fax (814) 723-3242

APPLICATION DATE: \_\_\_\_\_ Parcel ID # \_\_\_\_\_

Owner Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Phone # \_\_\_\_\_

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

Contractor: \_\_\_\_\_ Contact: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

DRIVEWAY LOCATION: \_\_\_\_\_

DESCRIPTION OF WORK:  Residential  Commercial  New  Repair /Replacement of Existing  
(Use back of application for sketch or attach your own)

Driveway Length \_\_\_\_\_ Driveway Width \_\_\_\_\_ Length of Opening \_\_\_\_\_

Work should begin on or about: \_\_\_\_\_

All contractors are required to provide a Workers' Compensation Insurance Certificate with "City of Warren, 318 W. Third Avenue, Warren, PA 16365", listed as the certificate holder or claim an exemption on the Workers' Compensation Insurance Coverage Information form.

The applicant does hereby agree to perform all work according to the requirements and regulations for installation and repair of driveways/curb cuts as provided for in the ordinances of the City of Warren, Pennsylvania.

I attest information furnished is accurate and true and will notify the Building Code Department of any changes.

Call the Public Works Department at (814) 723-6300 ext. 123 for initial inspection prior to commencing work and after curb is cut. **Please leave a 1-1/2" lip when performing curb cut.** A final inspection is required after project is completed.

Owner/Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*\*\*\*\* A 24 HOUR ADVANCED NOTICE IS REQUIRED WHEN SCHEDULING AN INSPECTION \*\*\*\*\***

Permit Approved?	<input type="checkbox"/> Yes <input type="checkbox"/> No	By: _____	Date: _____
PD Approved?	<input type="checkbox"/> Yes <input type="checkbox"/> No	By: _____	Date: _____
Zoning Approved?	<input type="checkbox"/> Yes <input type="checkbox"/> No	By: _____	Date: _____
Permit Fee: \$ _____	Payment: <input type="checkbox"/> Cash <input type="checkbox"/> Check	Permit No: _____	