



# STARTING FEBRUARY 1<sup>st</sup> 2026

## ALL APPLICATIONS MUST BE SUBMITTED WITH A DEPOSIT

RESIDENTIAL – \*EXCLUDING RE- ROOFS- \$100

RE-ROOF – PAYMENT IN FULL \$89.50

SOLAR - \$ 250

COMMERCIAL - \$250

ALL RE-REVIEW SUBMISSIONS - \$85

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RE-INSPECTIONS WILL BE \$125

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WE WILL NO LONGER ACCEPT INCOMPLETE APPLICATIONS  
APPLICATIONS MUST HAVE **ALL** OF THE FOLLOWING TO BE  
COMPLETE

- 1 - A SIGNED COMPLETED APPLICATION
- 2 - 2 SETS OF PLANS (EXCLUDING RE-ROOFS)
- 3 - CONTRACTORS LIABILITY INSURANCE (WHEN APPLICABLE)

Bureau Veritas North America  
*105 Government Center Way*  
*Suite 101*  
Pocono Pines, PA 18350

Main: (570) 894-2801

[www.us.bureauveritas.com](http://www.us.bureauveritas.com)



## STEPS TO OBTAINING YOUR BUILDING/DEMOLITION PERMIT

BUREAU VERITAS  
105 GOVERNMENT CENTER WAY  
SUITE 101  
POCONO PINES, PA 18350  
PHONE: (570) 894-2801

Complete the Bureau Veritas Permit Application

Complete the Direction Form

Obtain a Certificate of Liability Insurance from your  
Contractor/Builder

These forms along with two 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 by the DEP

***FULL PAYMENT IS REQUIRED PRIOR TO THE PERMIT BEING ISSUED***

Bureau Veritas North America, Inc.

**Permit Application**

Submit to: Bureau Veritas

105 Government Center Way, Suite 101, Pocono Pines PA 18350

Phone: 570-894-2801

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):

CHECK HERE - IF THIS PROJECT WAS DONE WITHOUT PREVIOUS PERMITS

Residential Project Description: \_\_\_\_\_ Cost: \$ \_\_\_\_\_

\_\_\_\_\_ # OF NEW BEDROOMS \_\_\_\_\_ # EXISTING BEDROOMS

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 #: \_\_\_\_\_ PAYMENT # \_\_\_\_\_

**DIRECTION FORM**

Address of construction site: \_\_\_\_\_  
(street) (city)

Please provide detailed directions to the construction location:

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