

Building & Zoning Permit Application

Location of Proposed Work or Improvement

Municipality: _____ Borough Township

Site Address: _____ Tax Parcel: _____

City: _____ State: _____ Zip Code: _____

Zoning District: _____ Lot Size: _____

Property Owner(s): _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email Address: _____

Principal Contractor: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email Address: _____

Design Professional / Architect: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email Address: _____

Type of Work or Improvement

Zoning Permit Only

New Building Addition Fire Protection Repair Energy Electrical

Mechanical Plumbing Change of Use Alteration Manufactured Housing

Swimming Pool Deck

Description of the Proposed Work: _____

Estimated Cost of Construction (Reasonable Fair Market Value)

Structural Cost	\$ _____
Installations Not Included in Above Cost	
Electrical	\$ _____
Plumbing	\$ _____
HVAC	\$ _____
Total Project Cost	\$ _____

Description of Building Use

Residential Uses

- One-Family Dwelling (R-3)
- Two-Family Dwelling (R-2)
- Multi-Family Dwelling (R-2)
- Hotel (R-1)

Non-Residential Uses

Specific Use: _____

Use Group: _____

Change in Use: Yes No

If Yes, Indicate Former: _____

Maximum Occupant Load: _____

Maximum Live Load: _____

Building Dimensions

Existing Building Area: _____ sq. ft. Number of Stories: _____

Proposed Building Area: _____ sq. ft. High of Structure Above Grade: _____ ft.

Total Building Area: _____ sq. ft. Area of Largest Floor: _____ sq. ft.

Building / Site Characteristics

Number of Residential Dwelling Units: _____ Existing _____ Proposed

Mechanical System - Indicate Type (i.e. Electric, Gas, Oil, etc.): _____

Water Service: Public Private

Sanitary Service: Public Private On-Lot Sanitary Permit #: _____

Does or will your building contain any of the following:

- Fireplace(s): Number _____ Type of Fuel _____ BTU's _____ Vent Type _____
- Elevator / Escalator / Lift / Moving Walk
- Sprinkler System
- Pressure Vessel
- Refrigeration System

Floodplain Development

Is the site located within an identified Special Flood Hazard Area? Yes No

Will any portion of the Special Flood Hazard Area be Developed? Yes No

Owner and/or agent shall verify that any proposed development activity complies with the requirements of the National Flood Insurance Program, the Pennsylvania Flood Plain Management Act (Act 166-1978), and any flood plain ordinance adopted by the municipality.

Applicant Certification

The applicant certifies that all information on this application is correct and the work will be completed in accordance with the "approved" construction documents and PA Act 45 (Uniform Construction Code) and any additional approved building code requirements or zoning ordinance adopted by the Municipality. The property owner and applicant assumes the responsibility of locating all property lines, setback lines, easements, rights-of way, flood areas, etc. Issuance of a permit and approval of construction documents shall not be construed as authority to violate, cancel or set aside any provisions of the codes or ordinances of the Municipality or any other governing body. The applicant certifies he/she understands all the applicable codes, ordinances and regulations. Application for a permit shall be made by the owner or lessee of the building or structure, or agent of either, or by the registered design professional employed in connection with the proposed work.

I certify that the code administrator or the code administrator's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

I certify that I am aware of the municipality's inspection requirements and have received a copy of the required inspections. Furthermore, I am aware that all inspections must be completed before a certificate of occupancy will be issued. I may not occupy the structure, for any purpose, prior to the issuance of a certificate. The installation of finishing materials or pouring of concrete slabs prior to the completion of required rough inspections will result in the need to remove any material to gain access to allow the inspection. Neither the jurisdiction nor the building official is liable for expenses entailed in the removal or replacement of any material required to allow inspection.

I certify that I am aware that a copy of the approved plans must remain at the construction site at all times until the project is complete and a certificate of occupancy has been issued. Additionally, I am aware that a copy of the building permit shall be kept on the site of the work until the completion of the project.

Signature of Owner or Authorized Agent

Print Name of Owner or Authorized Agent

Address

Date:

I would like to receive my permit electronically (residential permits only)

Email Address: _____

Required Project Documents:

- The following must be submitted to be considered a complete application:
- A plot plan must accompany the application indicating location of new construction and measurements to all lots lines.
- A Certificate of Insurance showing proof of General Liability Insurance for work performed by a contractor.
- An Affidavit of Exemption or Proof of Workers Compensation Insurance.
- Payment of the required Application Fee.
- Construction Documents: non-residential projects must have construction documents prepared, signed, and sealed by an Architect or Engineer. Construction documents shall not exceed 24"x36" in size. Three (3) copies of the construction documents must be submitted for non-residential projects.

FOR MUNICIPAL OFFICE USE ONLY

PERMIT NUMBER: _____ DATE: _____

TOTAL FEE: \$ _____ COLLECTED BY: _____

FEE BREAKDOWN:	PLAN REVIEW:	\$ _____
	ACCESSIBILITY:	\$ _____
	BUILDING:	\$ _____
	PLUMBING:	\$ _____
	MECHANICAL:	\$ _____
	ELECTRICAL:	\$ _____
	FIRE PROTECTION:	\$ _____
	ENERGY:	\$ _____
	DCED:	\$ _____
	ZONING:	\$ _____
	MUNICIPAL FEE:	\$ _____

CONDITIONAL USE APPROVAL REQUIRED: () YES () NO

PLANNING COMMISSION MEETING DATE: _____

GOVERNING BODY MEETING DATE: _____

ZONING VARIANCE REQUIRED: () YES () NO

ZONING HEARING BOARD MEETING DATE: _____

CONTRACTOR'S GENERAL LIABILITY INSURANCE ON FILE: () YES () NO

CONTRACTOR'S WORKMAN'S COMPENSATION INSURANCE ON FILE: () YES () NO

IF NO, IS NOTARIZED CERTIFICATE OF EXEMPTION ON FILE: () YES () NO

IS PROPOSED PROJECT LOCATED WITHIN A SPECIAL FLOOD HAZARD AREA: () YES () NO

IF YES, WHICH ZONE: _____

PERMIT APPROVAL

APPROVED () DISAPPROVED () _____ DATE: _____

BUILDING CODE OFFICIAL

APPROVED () DISAPPROVED () _____ DATE: _____

ZONING OFFICER