PERMIT APPLICATION

BUILDING PERMIT \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ELECTRICAL PERMIT\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Municipality\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tax Parcel\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Construction Site Location \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Received \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Owner\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Tenant\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State\_\_\_\_\_\_\_\_Zip\_\_\_\_\_\_\_\_Phone#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_\_\_\_\_Zip\_\_\_\_\_\_\_\_\_Phone#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Front Yard \_\_\_\_\_\_\_\_\_\_\_Ft. (Front of building to property line)|Describe proposed work in detail\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rear Yard \_\_\_\_\_\_\_\_Ft. (Rear of building to property line) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Side Yard \_\_\_\_\_\_\_\_ Ft. Side Yard \_\_\_\_\_\_\_\_ FT.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**State Classification**: New Commercial \_\_\_\_\_\_\_ Other Commercial \_\_\_\_\_\_\_ New Residential \_\_\_\_\_\_\_ Other Residential\_\_\_\_\_\_\_

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| BUILDING PERMIT  Contractor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (if owner, put same name above)  Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_ Zip\_\_\_\_\_\_\_\_\_\_\_\_  Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Fed Employee No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Certificate of Insurance for Workers Compensation needed or signed exemption form)  Estimate of total costs for all work \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Total square feet \_\_\_\_\_\_\_ Use Group \_\_\_\_ Type of Construction \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  No. of Stories \_\_\_\_ Height of Structure \_\_\_\_\_\_\_\_\_\_\_\_  Description of work: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Type of work  Alterations/Addistions of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Square Ft. \_\_\_\_  ( ) Roofing – Total square feet \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ( ) Fencing, supply height if it exceeds 6 foot \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ( ) Sign – Total Square feet \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ( ) Pool – Total Square feet \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ( ) Decks – Total Square feet \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ( ) Demolition – Total Square feet \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ( ) Accessibility \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **I hereby acknowledge that I have read this application and state the above is correct to comply with all Municipal Ordinances and State laws regarding construction.**  **Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Owner ( ) Contractor ( ) Owner Representative ( )  Building code official use only  Plans Approved \_\_\_\_\_ Plans Approved with comments \_\_\_\_\_\_\_\_\_  UCC Building Fee\_\_\_\_\_\_\_  Plan Review Fee \_\_\_\_\_\_\_  Admin Fee \_\_\_\_\_\_\_\_\_\_  State fee \_\_\_\_\_\_\_\_  Total Cost \_\_\_\_\_\_\_\_  Code Official \_\_\_\_\_\_\_ State Cert # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date Issued \_\_\_\_\_\_\_ | ELECTRICAL PERMIT  Contractor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (if owner, put same name above)  Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_\_  Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Fed Employee No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Certificate of Insurance for Workers Compensation needed or signed exemption form)  Estimate of total costs for all work \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Technical Site  Data No. Size Items  \_\_\_\_\_\_\_\_\_\_\_\_ Lighting Fixtures  \_\_\_\_\_\_\_\_\_\_\_\_ Receptacles  \_\_\_\_\_\_\_\_\_\_\_\_ Switches  \_\_\_\_\_\_\_\_\_\_\_\_ Detectors  \_\_\_\_\_\_\_\_\_\_\_\_ HP\_\_\_\_\_\_\_ Motor-Fractional  \_\_\_\_\_\_\_\_\_\_\_\_ Communication Devices  \_\_\_\_\_\_\_\_\_\_\_\_ Alarm Devices/Systems  \_\_\_\_\_\_\_\_\_\_\_\_ Emergency & Exit Lights  \_\_\_\_\_\_\_\_\_\_\_\_ Pool Bonding  \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ Service  \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ Sub-Panels  \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ Feeders  \_\_\_\_\_\_\_\_\_\_\_\_ Baseboard Heater  \_\_\_\_\_\_\_\_\_\_\_\_ Dryer Receptacle  \_\_\_\_\_\_\_\_\_\_\_\_ Range \_\_\_\_\_\_\_ Dishwasher \_\_\_\_\_Garbage Disp  Heater \_\_\_\_\_\_\_ Central A/C Units  \_\_\_\_\_\_\_\_\_\_\_\_ Signs  \_\_\_\_\_\_\_\_\_\_\_\_ Survey Fee  Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Owner ( ) Contractor ( ) Owner Representative ( )  ELECTRICAL CODE OFFICIAL USE ONLY  Plans Approved \_\_\_\_\_\_\_ Plans Approved with Comments \_\_\_\_\_\_\_  UCC Electrical Fee \_\_\_\_\_\_\_\_\_\_\_\_\_  Plan Review Fee \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Admin Fee \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  State Fee \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Total Cost \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Code Official \_\_\_\_\_\_\_\_\_\_\_\_ State Cert # \_\_\_\_\_\_\_\_\_\_\_\_  Date Issued \_\_\_\_\_\_\_\_\_\_\_\_\_ COPYRIGHTED |

Property Drawing

Please provide a sketch in the box below depicting the following information. All information must be displayed or the Zoning Permit Application may be deemed incomplete and may be denied.

Include the following:

* Rough sketch of your property boundary lines
* Depict all existing and proposed buildings
* Distance (in feet) from the proposed structure to all property lines (front, rear and both sides)
* Distance (in feet) from the proposed structure to the primary facility
* Distance (in feet) from the proposed structure to any other accessory structures

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| Area of Proposed Addittion \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_sq ft.  Area of Existing Buildings \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_sq ft.  Total Lot Area Covered (add a&b) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_sq ft.  Total Lot Area \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_sq ft.  Percentage of Lot Area Covered (divide c by d) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_sq ft.  Is a driveway entrance anticipated from the street? yes\_\_\_\_\_\_\_no\_\_\_\_\_\_\_\_\_. |

If the subject property was granted any type of variance, special exception, an/or other form of relief from the regulation contained in the Zoning Ordinance, by the Zoning Hearing Board and/or means, please provide the information in the space provided below. Please be specific as to the date of any Zoning Hearings for the property including a photocopy of any deed, recorded plan, agreement, will, covenant and/or any Zoning Hearing Board decision which contains said restriction, variances and/or special exceptions which affect the subject property.

If, to the best of the applicant’s knowledge and belief there are no such variances, special exceptions and/or other restrictions which would affect the use of the subject property for the activity for which azoning permit is being applied for, please indicate by signing below.

VERIFICATION STATEMENT

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby verify that the information contained in this application,including all statements, representations, and other entries, is true and correct to the best of my knowledge, information and belief. This verification is made subject to the penalties of 18 PA C.S. 4904, relating to unsworn falsification to authorities, and 4911, relating to tampering with official records.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

FOR OFFICIAL USE ONLY

#\_\_\_\_\_\_\_\_\_\_\_\_PERMIT GRANTED

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

Reason for Denial:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.