

# Residential Building Permit Application

(Drawings or Specs required)

Location of Proposed work or improvement

County: \_\_\_\_\_ Municipality(Township, Boro): \_\_\_\_\_

Site Address: \_\_\_\_\_ Tax Parcel # \_\_\_\_\_

Owner: \_\_\_\_\_

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

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

Principal contractor: \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

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

Architect: \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

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

## TYPE OF WORK OR IMPROVEMENT (Check all applicable)

- |  |  |                                     |                                     |
|--|--|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> New Building    | <input type="checkbox"/> Addition      | <input type="checkbox"/> Alteration | <input type="checkbox"/> Relocation |
| <input type="checkbox"/> Repair          | <input type="checkbox"/> Mechanical    | <input type="checkbox"/> Demolition | <input type="checkbox"/> Electrical |
| <input type="checkbox"/> Foundation Only | <input type="checkbox"/> Change of Use | <input type="checkbox"/> Plumbing   | <input type="checkbox"/> Other      |
| <input type="checkbox"/> Mobile Home     |  |                                     |                                     |

Describe the proposed work: \_\_\_\_\_

Estimated Cost of Construction (Reasonable fair market value) \$ \_\_\_\_\_

Description of Building use (check one)

### Residential

- One-Family Dwelling (R-3)  
 Two-Family Dwelling (R-3)

### NON-RESIDENTIAL

Specific Use: \_\_\_\_\_  
Use Group: \_\_\_\_\_  
Change in Use:  YES  NO  
If yes indicate Former: \_\_\_\_\_  
Maximum Occupancy Load: \_\_\_\_\_  
Maximum Live Load: \_\_\_\_\_

# Residential Building Permit Application (cont.)

## Mobile Home

Manufacturer: \_\_\_\_\_ Model/Year: \_\_\_\_\_

Serial #: \_\_\_\_\_

## Building/Site Characteristics

Number of Residential Dwelling Units: Existing \_\_\_\_\_ Proposed \_\_\_\_\_

Mechanical: Indicate Type of Heating/Ventilating/Air Conditioning \_\_\_\_\_

Water Service: (check)  Public  Private

Sewer Service: (check)  Public  Private Septic Permit # \_\_\_\_\_

## Does or will your building contain any of the following:

Fireplace(s): Number \_\_\_\_\_ Type of Fuel \_\_\_\_\_ Type Vent \_\_\_\_\_

Elevator/Escalators/Lifts/Moving walks: (check)  YES  NO

Sprinkler System:  YES  NO

Pressure Vessels:  YES  NO

Refrigeration Systems:  YES  NO

## BUILDING DIMENSIONS

Existing Building Area: \_\_\_\_\_ sq.ft. Number of Stories: \_\_\_\_\_

Proposed Building Area: \_\_\_\_\_ sq.ft. Height of Structure Above Grade: \_\_\_\_\_ ft.

Total Building Area: \_\_\_\_\_ sq.ft. Area of Largest Floor: \_\_\_\_\_ sq.ft.

## FLOOD PLAIN

Is the site located within an identified flood hazard area? (check one)  YES  NO

Will any portion of the flood hazard area be developed? (check one)  YES  NO  N/A

Owner/Agent shall verify that any proposed construction and/or development activity complies with the requirements of the National Flood Insurance Program and the Pennsylvania Flood Plain management Act (act 166-1978), specifically *section 60.3*

Lowest Floor Level: \_\_\_\_\_

## HISTORIC DISTRICT

Is the site located within a historic District?  YES  NO

If construction is proposed within a Historic District, a certificate of appropriateness may be required by the Municipality.

# Residential Building Permit Application (cont.)

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 adopted by the Municipality. The property owner and applicant assumes the responsibility of locating all property lines, setback lines, easements, right-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.**

\_\_\_\_\_  
Signature of Owner or Authorized Agent

\_\_\_\_\_  
Print Name of Owner or Authorized Agent

\_\_\_\_\_  
Address

\_\_\_\_\_  
Date

## Directions to the Site:

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

## FOR TOWNSHIP USE ONLY

- |   |                                   |                              |
|---|-----------------------------------|------------------------------|
| <input type="checkbox"/> Street Cut/Driveway        | <input type="checkbox"/> Approved | <input type="checkbox"/> N/A |
| <input type="checkbox"/> Cut and Fill               | <input type="checkbox"/> Approved | <input type="checkbox"/> N/A |
| <input type="checkbox"/> PennDOT Highway Occupancy  | <input type="checkbox"/> Approved | <input type="checkbox"/> N/A |
| <input type="checkbox"/> DEP Floodway or Floodplain | <input type="checkbox"/> Approved | <input type="checkbox"/> N/A |
| <input type="checkbox"/> Sewer Connection           | <input type="checkbox"/> Approved | <input type="checkbox"/> N/A |
| <input type="checkbox"/> On-Lot Septic              | <input type="checkbox"/> Approved | <input type="checkbox"/> N/A |
| <input type="checkbox"/> Zoning                     | <input type="checkbox"/> Approved | <input type="checkbox"/> N/A |
| <input type="checkbox"/> Other                      | <input type="checkbox"/> Approved | <input type="checkbox"/> N/A |