

Code Services

** OFFICE USE ONLY **

Date Received: _____
Zoning District: _____
Tax Parcel No.: _____
Zoning Permit No.: _____
UCC Permit No.: _____

PERMIT APPLICATION

Application is hereby made for a permit in conformity with requirements of the PA UCC, Pennsylvania Municipalities Planning Code, Current Local Zoning Ordinance and any amendments thereto for the following described work.

I. PROPERTY INFORMATION

Residential: ☐ One Family ☐ Two Family ☐ Manufactured ☐ Non-Residential

Municipality: _____ Development: _____ Lot: _____ Section: _____

Proposed Work Site Address: _____ Tax Parcel ID: _____

Lot Width: _____ Lot Depth: _____ Lot Size: _____
(Acres or Sq.ft.)

Property within Floodplain ☐ Yes ☐ No If Yes, Market Value of Property: _____

Do you have an elevation certificate ☐ Yes ☐ No If Yes, please attach a copy with submission

Property located in Historic District ☐ Yes ☐ No If Yes, also complete the Application for COA

II. CONTACT INFORMATION

Applicant: _____ email: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Phone: _____ Fax: _____

(If different than Applicant)

Property Owner: _____ email: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Phone: _____ Fax: _____

Contractor: _____ PA Registration: _____ Insurance: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ email: _____ Fax: _____

III. CONSTRUCTION

☐ Erect a Structure ☐ Principal ☐ Accessory Size (length, width and height) i.e. 20' L, 15' W, 12' H: _____

☐ Add to a Structure ☐ Principal ☐ Accessory Size (length, width and height) i.e. 20' L, 15' W, 12' H: _____

☐ Change of Use Existing: _____ Proposed: _____

☐ Erect a Fence Height: _____ (feet) ☐ Install a Swimming Pool ☐ In-ground ☐ Above-ground

☐ Erect a Sign (Provide sign proof along with plot plan) ☐ Sign Copy Change (Provide sign proof)

Type: ☐ Wall Mounted ☐ Ground ☐ Roof ☐ Other (Please Specify): _____

Height (distance from top of sign to ground): _____ (feet) Size (length and height of sign face) i.e. 6' L x 18" H: _____

☐ Off-street Parking Area or Parking Lot ☐ Establish a Home Occupation

☐ Other (Please Specify): _____

IV. PROJECT DESCRIPTION Provide a narrative which explains the proposed project based upon the items checked in the previous section (III)

Cost of Construction: _____ **Street Access:** ☐ Municipal ☐ State ☐ Other

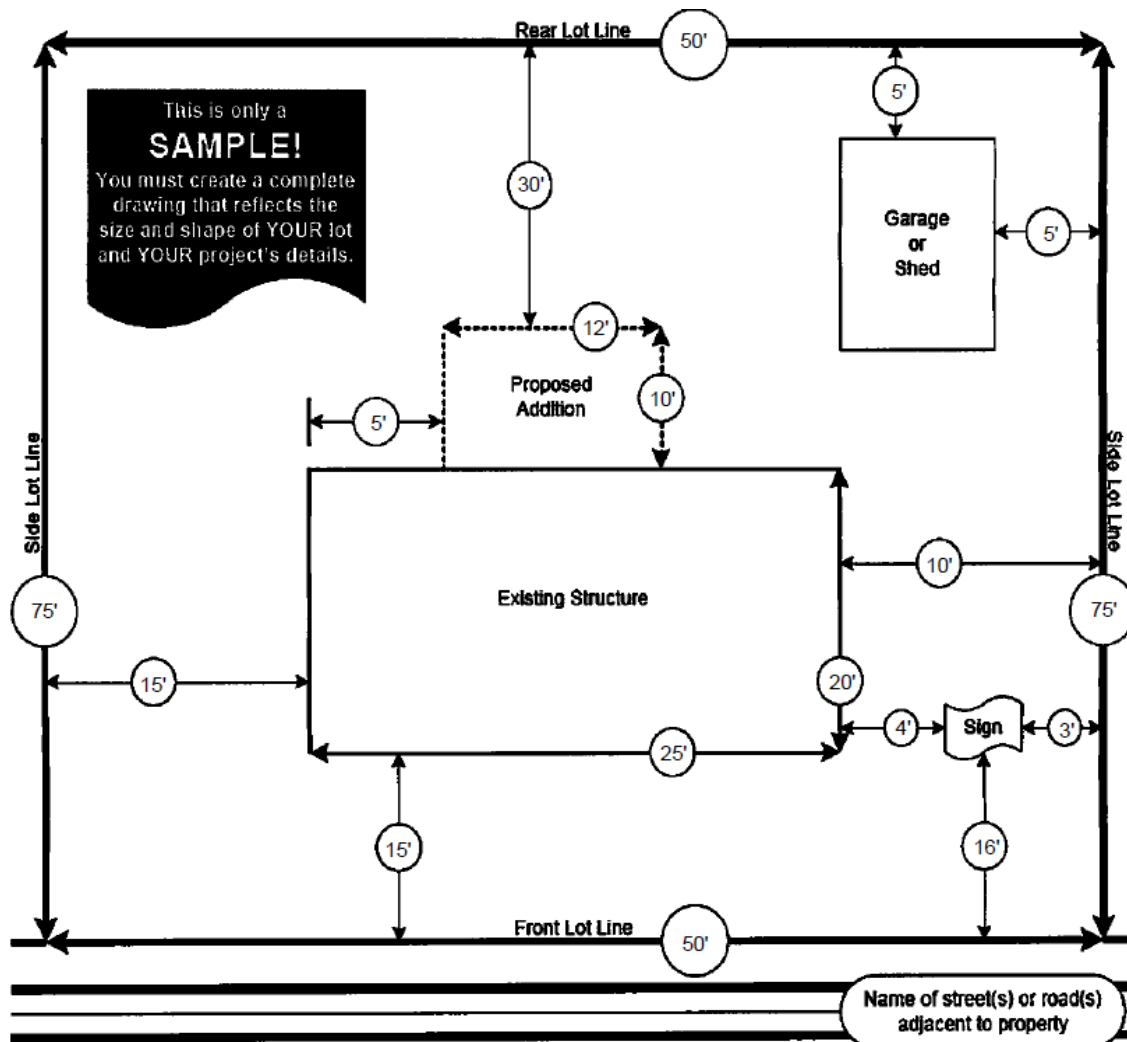
Sewage Disposal: ☐ Public Sewer ☐ On-Lot

Water Supply: ☐ Public Sewer ☐ On-Lot

V. PLOT PLAN

PLEASE INCLUDE THE FOLLOWING:

1. Indicate the length of all property lines
2. Show all existing and proposed structures on property and the distance from the structure to the property lines
3. Indicate name of streets abutting property
4. Identify all bodies of water and show distance to proposed structure(s)
5. Show septic, well, driveway locations and distance from new structure to septic
6. Label distances from principal structure to proposed accessory structure(s)
7. Physically mark property lines & proposed location of structure onsite prior to submitting zoning application

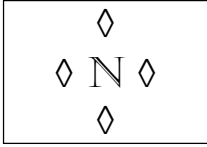


IMPERVIOUS COVERAGE

Proposed: _____ (Sq.ft.)

Existing: _____ (Sq.ft.)

Address: _____



PLOT PLAN

** A survey or other prepared plot plan can be attached, in lieu of this sketch sheet.*

Approved by: _____

Date: _____ Permit No.: _____

VI. ELECTRIC SERVICE									
Residential Non-Residential			<input type="checkbox"/> New Service		Upgrade Existing		Other:		
PPL		UGI		PECO		MET ED		Other	
Work Permit No.:					Overhead				
Meter No.:			Phase:		Voltage:		Amps:		Underground
VII. UCC CONSTRUCTION PERMIT									
Design Professional in Responsible Charge:					PA Registration:				
Person in Charge of Work:					email:				
Mailing Address:					City:		State:		Zip:
Phone:			Phone:			Fax:			
VIII. CONSTRUCTION DATA					IX. OTHER PERMITS				
No. Stories Above Grade:			Basement Y N		Mechanical \$		No. of Appliances:		
Construction Sq. Ft:			<i>(Copy of Signed Contract Required)</i>		Electrical \$		No. of Devices:		
<i>(Including other permit costs)</i>					Plumbing \$		No. of Fixtures:		
Total Cost of Construction: \$									
X. APPLICANT'S CERTIFICATION									
<p>As the owner or the authorized agent of the project for which this application is filed, I certify that:</p> <ol style="list-style-type: none"> 1. The inspector is hereby granted access to observe the work in this application upon coordination with the owner or his agents. 2. The estimated construction cost and all other information provided as part of this application for a building permit is correct. 3. The building or structure described in this application will not be occupied until all known code violations are corrected and a Certificate of Occupancy has been received from Building Code Official. 4. This project will be constructed in accordance with the approved drawings and specifications (including any required non-design changes) and the Uniform Construction Code standards as specified in 34 PA Code Chapters 401-405. 5. Any changes to the approved documents will be filed with the Building Code Official. 6. If the licensed architect or engineer in responsible charge of this construction should change, written notice of the change will be provided to the Building Code Official. 7. When required, up to 20% of the total cost of any work performed on an area of primary function in an existing building will be expended to provide an accessible route to the area of primary function or other approved accessibility improvements. 8. No error or omission in either the drawings and specifications or application, whether approved or not, shall permit or relieve me from constructing the work in any manner other than provided for in 34 PA Code Chapters 401-405. <p>I hereby authorize the Municipality Staff to perform inspections related to this application as may be required between the hours of 8 AM and 8 PM. The applicant understands and agrees to comply with the Pennsylvania Municipal Planning Code and Zoning Ordinance, as amended. All information supporting this application shall become part of the records of the Municipality, cannot be returned and may be examined by the public at any time during the normal working hours of the Municipal Office.</p> <p>Application is hereby made for a permit to erect or alter a structure which shall be located as shown on the attached diagram/plot plan and/or to use the premises for the purposes herewith. The information which precedes, together with the plot plan/diagram, is made part of this application by the undersigned. It is understood and agreed by the applicant that any error, misstatement or misrepresentation of material, fact, either with or without intention on the part of this applicant, such as might or would operate to cause a refusal of this application or any change in the location, size or use of structure or land made subsequent to the issuance of this permit without approval of the Zoning Officer, shall constitute sufficient ground for the revocation of this permit.</p>									
Applicant Signature:					Date:				
Owner Signature:					Date:				
<p>*BOTH SIGNATURES ARE REQUIRED IF APPLICANT IS DIFFERENT THAN OWNER</p> <p>*3 SETS OF DETAILED CONSTRUCTION PLANS MUST BE SUBMITTED WITH ALL PA UCC APPLICATIONS.</p> <p>*ALL COMMERCIAL CONSTRUCTION PLANS MUST BE PREPARED, SIGNED & SEALED BY A LICENSED DESIGN PROFESSIONAL.</p> <p>FAILURE TO FILL OUT THE PERMIT APPLICATION COMPLETELY MAY RESULT IN DELAYS OR REJECTION OF APPLICATION.</p>									

**** PA UCC OFFICE USE ONLY ****

PERMIT FEES	PROJECT DATA
Plan Review:	Use Group: Code Edition:
Permit & Inspection:	Construction Type: Fire Sprinkler: Y N
Municipality Admin:	APPROVED PERMITS
State:	Zoning Permit No.: NPDES Permit No.:
Total Permit Fee:	Sewage Permit No.: Water/Well Permit No.:

Permit No.:	Approval Date
Approved by:	

**** ZONING OFFICE USE ONLY ****

Meeting Dates (if applicable)

Historic: _____ Approved: ☐ Yes ☐ No

ZHB: _____ Approved: ☐ Yes ☐ No

Planning: _____ Approved: ☐ Yes ☐ No

Other: _____ Approved: ☐ Yes ☐ No

PA UCC Construction Permit Required: ☐ Yes ☐ No

Action Taken: ☐ Approved ☐ Denied

Zoning Fee: _____

Application Fee Paid: _____

Balance Due: _____

Date Paid: _____

Zoning Officer Signature: _____ **Date:** _____

If the permit is denied, the zoning officer shall note the applicable sections/basis of denial below:

A copy of the zoning officer's official letter of denial shall be attached to this application.