

UNIFORM CONSTRUCTION PERMIT APPLICATION WEST NANTMEAL TOWNSHIP

*** Required information**

***Date of Application** _____ **Permit #** _____

LOCATION OF PROPOSED WORK OR IMPROVEMENT

*Parcel/Site Address: _____

Tax Parcel ID # _____ Block _____ Unit _____

Lot # _____ Subdivision/Land Development: _____ Phase: _____ Section: _____

*Owner: _____ *Phone # _____ Fax # _____

*Owner Address: _____ *City: _____ *State: _____ * Zip: _____

*Applicant: _____ *Phone# _____ Fax# _____

*Applicant Address: _____ *City: _____ *State: _____ * Zip: _____

*Contractor: _____ *Phone# _____ Fax# _____

*Contractor Address: _____ *City: _____ *State: _____ * Zip: _____

Architect/Engineer: _____ Phone# _____ Fax# _____

Arch/Engr Address: _____ City: _____ State: _____ Zip: _____

***TYPE OF WORK OR IMPROVEMENT** (Check All That Apply)

New Building | Addition | Alteration | Repair | Demolition | Accessibility | Change of Use | Relocation

***PERMIT INSERTS ENCLOSED** (Check All That Apply)

Building | Electrical | Mechanical | Plumbing | Residential |
Deck | Fence | Shed | Swimming Pool |
Commercial License | Rental License | Road Opening | Sign | Zoning |

USE/OCCUPANCY CLASSIFICATION (Check All That Apply)

| | | | | | | | | | | | | | |
|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|
| A-1 | <input type="checkbox"/> | A-2 | <input type="checkbox"/> | A-3 | <input type="checkbox"/> | A-4 | <input type="checkbox"/> | A-5 | <input type="checkbox"/> | B | <input type="checkbox"/> | E | <input type="checkbox"/> |
| F-1 | <input type="checkbox"/> | F-2 | <input type="checkbox"/> | H-1 | <input type="checkbox"/> | H-2 | <input type="checkbox"/> | H-3 | <input type="checkbox"/> | H-4 | <input type="checkbox"/> | H-5 | <input type="checkbox"/> |
| I-1 | <input type="checkbox"/> | I-2 | <input type="checkbox"/> | I-3 | <input type="checkbox"/> | I-4 | <input type="checkbox"/> | M | <input type="checkbox"/> | R-1 | <input type="checkbox"/> | R-2 | <input type="checkbox"/> |
| R-3 | <input type="checkbox"/> | R-4 | <input type="checkbox"/> | S-1 | <input type="checkbox"/> | S-2 | <input type="checkbox"/> | U | <input type="checkbox"/> | | | | |

***DESCRIBE THE PROPOSED WORK:**

***ESTIMATED COST OF CONSTRUCTION** (reasonable fair market value) \$ _____

PERMIT FEE: \$ _____ (ALL PERMITS) + \$ _____ (C of O) + \$4.00 (UCC FEE) = \$ _____

DESCRIPTION OF BUILDING USE (Check One)

RESIDENTIAL

Hotels (R-1)
Multi-Family (R-2)
One-Family Dwelling (R-3)
Two-Family Dwelling (R-3)
Res. Care/Assisted Living (R-4)

NON-RESIDENTIAL

Use Group: _____
Change in Use: YES NO
If YES, Indicate Former: _____
Maximum Occupancy Load: _____
Maximum Live Load: _____

| | | | |
|--------------------------------|--|---------------------------------------|--|
| Sq. ft. of conditioned space | | Floor area new construction (sq. ft.) | |
| Sq. ft. of unconditioned space | | Floor area of addition (sq. ft.) | |
| Number of stories above grade | | Floor area renovated (sq. ft.) | |
| Does it have a basement ? | <input type="checkbox"/> Yes <input type="checkbox"/> No | # of multi-family dwelling units | |
| Total floor area (sq. ft.) | | # of accessible dwelling units | |

***ZONING COMPLIANCE**

Does municipality have a zoning ordinance? Yes No
If "yes," has zoning permit been obtained? Yes No Date _____
Minimum setbacks required by zoning ordinance (ft):
Front _____ Rear _____ Right Side _____ Left Side _____

***BUILDING/SITE CHARACTERISTICS**

Number of Residential Dwelling Units: _____ Existing, _____ Proposed
Mechanical: Indicate Type of HVAC System (Hot Air, etc.) and Fuel (*i.e.*, electric, gas, etc.)

Type: _____
Fuel: _____

Water Service: (*Check*) Public Private
Sewer Service: (*Check*) Public Private (Septic Permit # _____)

***BUILDING SPECIAL FEATURES**

Fireplace(s): Number _____ Type of Fuel _____ BTU's _____ 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 the Largest Floor: _____ sq. ft.

***FLOODPLAIN**

Is the site located within an identified flood prone area? (Check One) YES NO N/A
Will any portion of the flood prone area be developed? (Check One) YES NO N/A

If "yes," attach one of the flood hazard certifications mandated in section 1612.5 of the International Building Code.

Owner/Agent shall verify that any proposed construction 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 (d).

***WETLANDS**

Is the site located within an identified wetland area? (Check One) YES NO
Will any portion of the wetland area be developed? (Check One) YES NO N/A

Owner/Agent shall verify that any proposed construction activity complies with the requirements of the Commonwealth of Pennsylvania Department of Environmental Protection (25 Pa. Code Chapter 105).

FOR CODE ADMINISTRATOR USE ONLY

ADDITIONAL PERMITS/APPROVALS REQUIRED:

| | | |
|----------------------------|---------------|-------|
| STREET CUT/DRIVEWAY | -----APPROVED | _____ |
| CUT AND FILL | -----APPROVED | _____ |
| PENNDOT HIGHWAY OCCUPANCY | -----APPROVED | _____ |
| DEP FLOODWAY OR FLOODPLAIN | -----APPROVED | _____ |
| SEWER CONNECTION | -----APPROVED | _____ |
| ON-LOT SEPTIC | -----APPROVED | _____ |
| ZONING | -----APPROVED | _____ |
| HARB | -----APPROVED | _____ |
| OTHER | -----APPROVED | _____ |

APPROVALS:

| | | |
|------------------------------------|--------------------|---------------------|
| BUILDING PERMIT DENIED: | Date _____ | Date Returned _____ |
| BUILDING PERMIT APPROVED: | _____ | Date _____ |
| CODE ADMINISTRATOR | _____ | |
| Date Issued _____ | Date Expires _____ | PERMIT # _____ |
| BUILDING PERMIT FEE \$ _____ | | RECEIPT # _____ |
| PLUMBING PERMIT (if appl.) _____ | | RECEIPT # _____ |
| MECHANICAL PERMIT (if appl.) _____ | | RECEIPT # _____ |
| ELECTRICAL PERMIT (if appl.) _____ | | RECEIPT # _____ |

PROJECT DOCUMENTS (DRAWINGS & CALCULATIONS)

| Type of document: | Submitted | | Signed & Sealed | | Date: | Revision Date: |
|--------------------------------------|-----------|----|----------------------------------|----|-------|----------------|
| Geotechnical Report | Yes | No | Yes | No | _____ | _____ |
| Foundation Plans | Yes | No | Yes | No | _____ | _____ |
| Construction Drawings | Yes | No | Yes | No | _____ | _____ |
| Structural Calculations | Yes | No | Yes | No | _____ | _____ |
| Electrical Drawings | Yes | No | Yes | No | _____ | _____ |
| Mechanical Drawings | Yes | No | Yes | No | _____ | _____ |
| Plumbing Drawings | Yes | No | Yes | No | _____ | _____ |
| Specifications | Yes | No | Yes | No | _____ | _____ |
| Workers Comp.Certificate | Yes | No | Yes | No | _____ | _____ |
| Plans Reviewed by _____ | | | PA Reg & Cert # _____ | | | |
| Accessibility Rev'd by: _____ | | | PA Reg & Cert # _____ | | | |

DATE STAMP:

| | | |
|-----------------------------|--------------------------|-------------------------|
| APPLICATION RECEIVED | REVIEWS COMPLETED | PERMITS APPROVED |
| | | |

Applicant's Certification:

As the owner or the authorized agent of the project for which this application is filed, I certify that:

1. The applicant certifies that description of use, estimated construction cost and all other information provided as part of this application for a building permit is correct.
2. The property owner and applicant assumes the responsibility of locating all property lines, setback lines, easements, rights-of way, flood areas, etc.
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 the Township of West Nantmeal.
4. This project will be constructed and the work will be completed in accordance with the "approved" construction documents and the Uniform Construction Code standards as specified in 34 PA Code Chapters 401-405, and any additional approved building code requirements adopted by the Municipality.
5. Any changes to the approved documents will be filed with the Township of West Nantmeal.
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 Township of West Nantmeal.
7. No error or omission in either the drawings and specifications or application, whether approved or not, or issuance of a permit shall permit or relieve me from constructing the work in any manner other than provided for in 34 PA Code Chapters 401-405 and any additional approved building code requirements adopted by the Municipality.
8. If signed by someone other than the construction owner, this work has been authorized by the owner of record and I have been authorized by the owner to complete this application on his behalf. I will be acting on behalf of the owner as:

___ ARCHITECT ___ ENGINEER ___ CONTRACTOR ___ AGENT/OTHER:

9. The applicant certifies he/she understands all the applicable codes, ordinances and regulations.

APPLICANT **MUST** COMPLETE THE ENTIRE SECTION BELOW:

* **OWNER** **OTHER** *INDICATE* (Architect Engineer Contractor Agent/Other)

*Applicant signature:

*Name (typed or printed)

*Phone Number

Fax Number

email

*Mailing Address:
