WEST DONEGAL TOWNSHIP One Municipal Drive Elizabethtown, Pennsylvania 17022 Lancaster County Phone: 717-367-7178 Fax: 717-367-8982

CONSTRUCTION CODE PERMIT APPLICATION

LOCATION OF PROPOSED WORK OR IMPROVEMENT:

Site Address:		Tax	Tax Parcel #		
Lot #Subdivision/Land Development:			Phase:		
Owner:	Owner: Phone:		Fax #		
Mailing Address:			E-Mail:		
Principal Contractor:		Phone:	Fax:		
Mailing Address:			_E-Mail:		
Subcontractor:		Phone:	Fax:		
Mailing Address:			_E-Mail:		
Subcontractor:		Phone:	Fax:		
Mailing Address:			_E-Mail:		
Architect:		Phone:	Fax:		
Mailing Address:			E-Mail:		
TYPE OF WORK OR New Building Relocation Mechanical	Addition Foundation Only Electrical	Alteration Change of Use	Repai r Plumbing	Demolition	
Describe the current con	dition of the property: _				
Describe the proposed w	70 r k:				
ESTIMATED COST (DF CONSTRUCTION	(Reasonable Fair Marke	et Value) \$		

DESCRIPTION OF BUILDING USE (Circle One)

RESIDENTIAL	NON-RESIDENTIAL
One-Family Dwelling	Specific Use:
Two-Family Dwelling	Use Group:
Multiple Family Dwelling	Change in Use: YesNo:
	If YES, indicate former:
Townhouse Dwelling	Maximum Occupancy Load:
	Maximum Live Load:

ATTACH A COPY OF THE ZONING PERMIT ISSUED BY THE ZONING OFFICER AUTHORIZING THE ABOVE-DESCRIBED USE. THIS APPLICATION IS NOT COMPLETE WITHOUT A COPY OF THE ZONING PERMIT. IF THE ABOVE-DESCRIBED USE OR THE CONSTRUCTION WAS THE SUBJECT OF ANY HEARINGS BEFORE THE ZONING HEARING BOARD, THIS APPLICATION IS NOT COMPLETE WITHOUT A COPY OF THE DECISION OF THE ZONING HEARING BOARD.

Recording reference of Subdivision or Land Development Plan:

Does the work require an Erosion and Sedimentation Control Plan? Yes_____ No_____

If yes, provide proof that the Lancaster County Conservation District has approved the Erosion and Sedimentation Control Plan.

Does the work require installation of a new driveway to access a public street? Yes_____No____

BUILDING/SITE CHARACTERISTICS

Number of Residential Dwelling Units:	Existing	Proposed	
---------------------------------------	----------	----------	--

Mechanical: Indicate Type of Heating/Ventilation/Air Conditioning (i.e. electric, gas, oil, etc.)

Water Service: (Circle)	Private
	Public (If new construction, attach a copy of the connection permit issued by the public water service
	provider)
Sewer Service: (Circle)	Private (Septic Permit #)
	Public (If new construction, attach a copy of the connection permit issued by the public sewer service
	provider)

Does or will your building contain any of the following:

Fireplace(s): #'	Type of Fuel	Type of Vent
Elevator/Escalator/Lifts/Mov	ing Walks Yes	No
Sprinkler System:	Yes	No
Pressure Vessels:	Yes	No
Refrigeration Systems:	Yes	No

BUILDING DIMENSIONS

Existing Building Area	<u>sq.</u> ft.	Number of Stories	
Proposed Building Area	sq. ft.	Height of Structure Above Grade:	<u>ft.</u>
Total Building Area	sq. ft.	Area of the Largest Floor:	<u>sq.</u> ft.

FLOODPLAIN

Is the site located within an identified flood hazard area? Yes_____No_____ Will any portion of the flood hazard area be developed? 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 established pursuance to Act 167? (Circle) Yes No If construction is proposed within a Historic District, a certificate of appropriateness may be required by the Municipality.

I hereby authorize the designated Township Officials to enter on the property and to investigate, inspect, and examine the Property set forth herein, including land and structures, to determine compliance with the Construction Code and to determine the accuracy of the statements contained herein.

I am aware that I cannot commence excavation or construction until the Township has issued a Construction Code Permit. By signing this Application, I certify that all facts in the Application and all accompanying documentation are true and correct. This Application is being made by me to induce official action on the part of the Township, and I understand that any false statements made herein are being made subject to the penalties of 18 Pa. C.S. §4904 relating to unsworn falsification to authorities.

I expressly acknowledge that the issuance of a Construction Code Permit is based upon the facts stated and representations made in this Application. I expressly acknowledge that the Township may revoke a Construction Code Permit if the use and/or structure for which it has been issued violates any applicable Township, County, State or Federal law or regulation. I also expressly acknowledge that the Township may revoke a Construction Code Permit if it has been issued in error or if issuance was based upon any misrepresentations or errors contained in the Application or otherwise made by the Applicant.

I acknowledge that the holder of a Construction Code Permit is responsible to insure compliance with all applicable Township Ordinances during and at completion of the work authorized by the Construction Code Permit. I acknowledge that the Township requires a final inspection be performed by the Construction Code Official and that the Township issue a Certificate of Occupancy before the structure which is authorized by the Construction Code Permit may be occupied. It is my responsibility to insure that this inspection is scheduled and the Certificate of Occupancy obtained before the structure may be may be occupied. I acknowledge that if I occupy or permit the Occupancy of this structure prior to the issuance of a Certificate of Occupancy under the Construction Code, I will have committed a violation of the Construction Code and will be subject to the penalties and remedies in the Construction Code Ordinance. I also acknowledge that it may be adequately inspected. If the Township is required to perform an inspection after the structure is occupied, intending to be legally bound hereby, I agree to pay the fee established by the Township for delinquent inspections.

Nothing contained in this Application shall be constructed to relieve or limit the obligations of the Applicant to complete with all provision of the Zoning Ordinance or to waive violations of the Zoning Ordinance or any other Township Ordinances or to stop the Township from enforcing Township Ordinances, including but not limited to the Zoning Ordinance. I expressly acknowledge that permits and Certificates of Use and Occupancy may be required under the Zoning Ordinance and it is my obligation to obtain all permits and approvals the Zoning Ordinance requires before the structure which is authorized by the Construction Code Permit may be authorized.

Signature of Owner or Authorized Agent

Print Name of Owner or Authorized Agent

Address

Directions to Site:

Date

(FOR CODE ADMINISTRATOR USE ONLY)

ADDITIONAL PERMITS/APPROVALS REQUIRED

Subdivision or Land Development Plan	Approved:
Stormwater Management Permit	Approved:
Erosion and Sedimentation Control	Approved:
Driveway	Approved:
PennDOT Highway Occupancy	Approved:
DEP-Floodway or Floodplain	Approved:
Public Sewer Connection	Approved:
On-Lot Septic	Approved:
Public Water Connection	Approved:
Zoning	Approved:
Harb	Approved:
Other	Approved:

APPROVALS

Construction Code Permit Denied: Date:		Date Returned:
Construction Code Permit Approved:	Date:	
Code Administrator:		
Date Issued:Date	Expires:	Permit #
Construction Code Administrative Fee	\$ <u>50.00</u>	Receipt #
Construction Code State Training Fee	\$ <u>4.00</u>	Receipt #
Construction Code Plan Review Fee	\$	Receipt #
Construction Code Estimated Inspection Fe	e \$	Receipt #
Construction Code Additional Inspection Fe	ee \$	Receipt #
Plumbing Permit (if applicable)	\$	Receipt #
Mechanical Permit (if applicable)	\$	Receipt #
Electrical Permit (if applicable)	\$	Receipt #

(FOR CODE ADMINISTRATOR USE ONLY)

Type of Document:	Submitted (Circle)	Signed & Sealed (Circle)	Date	Revision Date
Foundation Plans	Yes No	Yes No		
Construction Drawings	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		
Flood Hazard Area Date	Yes No	Yes No		
Worker Comp. Certificate	Yes No	Yes No		

PROJECT DOCUMENTS (DRAWINGS & CALCULATIONS)

INSPECTION CHECKLIST

Address:_____

Permit #_____

<u>Required</u> <u>Type</u>	<u>Date</u>	Inspector	<u>Comments</u>
Foundation #1 Foundation #2 Foundation #3			
Masonry #1 Masonry #2 Masonry #3			
Plumbing #1 Plumbing #2 Plumbing #3			
Mechanical #1 Mechanical #2 Mechanical #3			
Electrical #1 Electrical #2 Electrical #3 Electrical #4			

INSPECTION CHECKLIST

(continued)

Required Type	Date	Inspector	Comments
Framing #1			
Framing #2			
Framing #3			
Wallboard #1			
Wallboard #2			
Wallboard #3			
Final #1			
Final #2			
Final #3			
Temporary C/C)		
Certificate of Occu	pancy		