

PAXTANG BOROUGH

4/08

PERMIT # _____

3423 DERRY STREET

HARRISBURG, PA 17111

Tax Parcel # _____

Phone: 717-564-4770 Fax: 717-561-2020

OFFICE HOURS: Monday through Friday 10 AM to 4:00 PM

APPLICATION FOR PLAN REVIEW AND BUILDING / ZONING PERMIT APPROVAL

SECTION I: Check 1 & 2 Family Dwelling Multi-Family & Commercial

Site Address _____

Owner _____ Day Time Phone _____ Fax _____

Mailing Address _____

Contractor _____ Phone _____ Cell _____

Mailing Address _____ Fax _____

Architect or Engineer _____ Phone _____ Fax _____

Mailing Address _____

Applicant _____ Phone _____ Fax _____

Mailing Address _____

SECTION II:

TYPE OF IMPROVEMENT (Check All That Apply)

- New Construction Addition Shed Fence Relocation Alteration Foundation Only
- Change of Use Sign Public Sidewalk Private Sidewalk / Driveway Patio / Deck Repair*
- Demolition* Plumbing* Electrical* Mechanical *

* Does not require a Zoning Permit

Describe the proposed work in detail: _____

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

Cost of construction subject to verification by the Building Official based on current valuation tables.

ESTIMATED START DATE OF PROJECT _____ **COMPLETION DATE** _____

SECTION III: Trade Services

Plumbing

Will there be any plumbing work? Yes No If yes, complete information below

Plumber and/or Company Name _____ Phone _____

Address _____ Insurance Attached: Yes No

Paxtang Borough License # _____

Electrical

Will there be any electrical work? Yes No If yes, complete information below

Electrician and/or Company Name _____ Phone _____

Address _____ Insurance Attached: Yes No

SECTION IV: New Construction , Additions and Major Renovations

DESCRIPTION OF BUILDING USE(S): (Check all that apply) Change of Use? Yes No If Yes, Indicate Former _____

Residential

- Single Family
- Two-Family Dwelling
- Multi-Family

Non-Residential

- Specific Use _____
- Max Occupancy _____
- Max Live Load _____

IBC Use Group _____

Describe, in detail, the present and proposed use of the building or structure

BUILDING DIMENSIONS: Stories Above Grade: _____ Below Grade: _____

Height Above Grade (Measured to mean height of roof): _____ Width: _____ Length: _____

BUILDING AREA (based on actual square footage, not based on living space): Existing (Sq. Ft.) _____

Total (Sq. Ft.) _____ Largest Floor Area (Sq. Ft.) _____ Proposed (Sq. Ft.) _____

LOT SIZE (Must be completed for deck / patio): Square Feet _____

Percentage of Building Coverage on Lot: Existing _____ Proposed _____

FLOODPLAIN: Is the site located within an identified flood prone area? (Check) Yes No

Will any portion of the flood prone area be developed? (Check) Yes No N/A

If any construction or development will be within a flood prone area the “Supplement to Building Permit Application Form for Development in the Floodplain” must be completed and submitted along with this application.

Residential Construction

RESIDENTIAL USE GROUPS: Number of Units/Suites/Rooms _____ Number of Dwelling Units _____

PARKING: Number of off-street parking spaces: Existing _____ Proposed _____

HVAC: Type of Heating/Ventilating/Air Conditioning System (i.e.: electric, gas, oil, etc.) _____

WATER SERVICE: (Check One) Public Private

SEWER: (Check One) Public Private

FIREPLACE(S): Number _____ Type of Fuel _____ Type Vent _____

Commercial Construction

PARKING: Number of off-street parking spaces: Existing _____ Proposed _____

Handicap Accessible _____ Van Accessible Handicap _____

Total Occupancy Loads (Maximum): Existing: _____ Persons Proposed: _____ Persons

Total Number of Employees (Maximum): Existing: _____ Persons Proposed: _____ Persons

WATER SERVICE: (Check One) Public Private

SEWER: (Check One) Public Private

SPRINKLER SYSTEM Yes No **PRESSURE VESSELS** Yes No

ELEVATOR: Yes No **REFRIGERATION SYSTEMS** Yes No

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 all applicable codes, ordinances and regulations of Paxtang Borough and all applicable State and Federal regulations. The property owner and applicant assumes the responsibility of locating all property lines, setback lines, easements, rights-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 Paxtang Borough or any other governing body. The applicant certifies he/she understands all the applicable codes, ordinances and regulations. The applicant acknowledges Paxtang Borough may charge an additional fee for the failure of a party scheduling an inspection to appear, or to cancel or reschedule an appointment for work that is otherwise not ready for inspection.

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. If the application is made by a person other than the *owner* in fee, it shall be accompanied by an affidavit of the *owner* or the qualified applicant or a signed statement of the qualified applicant witnessed by the code official or his designee to the effect that the proposed work is authorized by the *owner* in fee and that the applicant is authorized to make such application. The full names and addresses of the *owner*, lessee, applicant and responsible officers, if the *owner* or lessee is a corporate body, shall be stated in the application.

For each review of construction plans beyond the initial review and report and one additional review, or if after the initial plan review the permit application is withdrawn, the permit applicant will be charged a plan review fee as designated by Paxtang Borough. I certify that the code official or the code official’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 Applicant

Print/Type Name

Date

Signature of Owner

Print/Type Name

Date

THE PERMIT APPLICATIONS WILL BE REVIEWED ON A FIRST COME, FIRST SERVE BASIS. THE TIME FRAME WILL VARY WITH OUR WORKLOAD AND THE TYPE OF CONSTRUCTION (I.E. SHEDS, ADDITIONS, LARGE PROJECTS, ETC.). A PERMIT WILL NOT BE ISSUED UNTIL THE CONSTRUCTION DOCUMENTS (APPLICATIONS AND PLANS) MEET ALL THE ORDINANCES AND CODES OF PAXTANG BOROUGH AND ALL FEES HAVE BEEN PAID. INSPECTIONS WILL NOT BE SCHEDULED PRIOR TO ISSUANCE OF A PERMIT. **THIS PERMIT IS VOID IF CONSTRUCTION IS NOT STARTED WITHIN 180 DAYS OR IS DISCONTINUED FOR A PERIOD OF 180 DAYS OR MORE.**

BOROUGH OFFICIAL USE ONLY

BUILDING PERMIT APPROVED: <input type="checkbox"/>	DENIED: <input type="checkbox"/>	DATE ISSUED _____	PERMIT # _____
PERMIT APPLICATION FEE \$ _____	RECEIVED BY _____	DATE _____	
PERMIT APPROVED BY: _____			
ZONING VARIANCE (IF NEEDED) _____			
ZONING PERMIT: APPROVED <input type="checkbox"/>	DENIED <input type="checkbox"/>	N/A <input type="checkbox"/>	DATE _____

CONTRACTORS WORKERS' COMPENSATION INSURANCE COVERAGE INFORMATION
(attach to building permit application)

A. The Applicant is -

A contractor within the meaning of the Pennsylvania Workers' Compensation Law

YES NO (Complete Worker's Comp. Affidavit)

If the answer is "yes", complete Section B and C below as appropriate.

B. Insurance Information

Name of Applicant _____

Federal or State Employer Identification No. _____

Applicant is a qualified self-insurer for Workers' Compensation Certificate attached

Name of Workers' Compensation Insurer _____

Workers' Compensation Insurance Policy No. _____

Certificate Attached

Policy Expiration Date _____

C. Exemption

Complete Section C if the applicant is a contractor claiming exemption from providing Workers' Compensation Insurance.

The undersigned swears or affirms that he/she is not required to provide Workers' Compensation Insurance under the provisions of Pennsylvania Workers' Compensation Law for one of the following reasons, as indicated.

Contractor with no employees. Contractor prohibited by law from employing any individual to perform work pursuant to this building permit unless contractor provides proof of insurance to the borough.

Religious exemption under the Workers' Compensation Law.

Signature of Applicant _____

Address _____

City _____

State _____ Zip _____

WITNESS:

Signature _____

Print Name _____ Date _____

WORKER'S COMPENSATION AFFIDAVIT

I _____ (Print Name) do solemnly swear that I will not employ/hire any other persons for the project for which I am seeking a building permit.

After receipt of the building permit if I employ any other persons I must notify the Borough Office and provide proof of Workers' Compensation coverage within three working days.

I understand that failure to comply will result in a stop-work order and that such order may not be lifted until proper coverage is obtained as provided by Section 302 (e) (4) of the Act of June 2, 1915 (P.L. 736) known as the Pennsylvania Workman's' Compensation Act. reenacted and amended June 21, 1939 and amended December 5, 1974 and amended July 2, 1993 (P.L.)

(Signature)

WITNESS:

Signature

Print Name