

# Permit Application



Customer Number  
if known

MDIA Office

Number \_\_\_\_\_

## Location of Proposed Work or Improvement

Municipality\* \_\_\_\_\_ County\* \_\_\_\_\_

Site Address\* \_\_\_\_\_ Tax Parcel # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Lot # \_\_\_\_\_ Subdivision/Land Development \_\_\_\_\_ Phase \_\_\_\_\_ Section \_\_\_\_\_

Owner\* \_\_\_\_\_ Phone #\* \_\_\_\_\_ Fax # \_\_\_\_\_

Mailing Address\* \_\_\_\_\_ E-Mail\* \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Principal Contractor\* \_\_\_\_\_ Phone #\* \_\_\_\_\_ Fax # \_\_\_\_\_

Mailing Address\* \_\_\_\_\_ E-Mail\* \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Design Professional/Architect\* \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Mailing Address \_\_\_\_\_ E-Mail\* \_\_\_\_\_

City \_\_\_\_\_ State\* \_\_\_\_\_ Zip code \_\_\_\_\_

### Type of Work or Improvement\* (Select all that apply)

- New Building     Addition     Alteration     Repair     Demolition     Relocation     Energy  
 Foundation Only     Change of Use     Plumbing     Mechanical     Electrical     Fire Protection

Describe the proposed work

### Estimated Cost of Construction\* (reasonable fair market value. Must be entered.)

a. Structural Cost \$ \_\_\_\_\_

Installation(s) not included in above cost

b. Electrical \$ \_\_\_\_\_

c. Plumbing \$ \_\_\_\_\_

d. Heating, Air Conditioning \$ \_\_\_\_\_

e. Other \_\_\_\_\_ \$ \_\_\_\_\_

**Total Cost of Project (a+b+c+d+e)** \$ \_\_\_\_\_

**Description of Building Use \*(Select One)**

Residential

- One-Family Dwelling (R-3)
- Two-Family Dwelling (R-2)
- Multi-Family (R-2)
- Hotels (R-1)

Non-Residential

Specific Use: \_\_\_\_\_

Use Group: \_\_\_\_\_

Change in Use:  Yes  No

If YES, Indicate Former: \_\_\_\_\_

Maximum Occupancy Load: \_\_\_\_\_

Maximum Live Load: \_\_\_\_\_

**Building/Site Characteristics**

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

**Mechanical:** Indicate Type of Heating/Ventilating/Air Conditioning (i.e., electric, gas, oil, etc.) \_\_\_\_\_

**Water Service:** (Select)  Yes  No

**Sewer Service:** (Select)  Yes  No Septic Permit # \_\_\_\_\_

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

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

**Elevator/Escalators/Lifts/Moving walks:** (Select)  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.

**FLOODPLAIN**

Is the site located within an identified flood prone area? (Select One)  Yes  No

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

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).

**HISTORIC DISTRICT**

Is the site located within a Historic District?  Yes  No

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

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, 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 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\*

\_\_\_\_\_  
Designated Municipal Official

Date\*

Directions to Site:

\* Indicates required field.

Select office to send

Pennsylvania

New York

Maryland

Delaware

Virginia

Office Unknown