

# RESIDENTIAL CONSTRUCTION PERMIT APPLICATION

DATE APPLICATION RECEIVED: \_\_\_\_\_

OWNER NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_

LOCATION OF PROPERTY: \_\_\_\_\_

MUNICIPALITY: \_\_\_\_\_ COUNTY: \_\_\_\_\_

DESCRIPTION OF CONSTRUCTION: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

TOTAL SQ. FT. OF CONSTRUCTION: \_\_\_\_\_ ESTIMATED COST OF CONSTRUCTION: \_\_\_\_\_

BUILDER NAME: \_\_\_\_\_

DBA: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_

APPLICANT IS RESPONSIBLE FOR OBTAINING REQUIRED HIGHWAY OCCUPANCY PERMITS FROM THE PA DEPARTMENT OF TRANSPORTATION AS REQUIRED UNDER SECTION 402 OF THE STATE HIGHWAY LAW (36 P.S. § 670-420). I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT. I HEREBY AGREE THAT ALL APPLICABLE PROVISIONS OF THE MUNICIPALITIES CODES SHALL BE COMPLIED WITH, AS WELL AS THE REQUIREMENTS OF THE MUNICIPAL SEWER AND WATER AUTHORITY WHETHER SPECIFIED OR NOT.

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT AND ACKNOWLEDGES THE SMOKE DETECTOR REQUIREMENTS INVOLVED WITH ALTERATION, REPAIR AND ADDITION PERMITS.

\_\_\_\_\_  
APPLICANT/ AGENT SIGNATURE

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
DATE

\*\*\*\* FOR DEPARTMENT USE ONLY \*\*\*\*

**BUILDING PERMIT APPLICATION**    APPROVED    DENIED

BUILDING PERMIT FEE    \$ \_\_\_\_\_

BY: \_\_\_\_\_

MUNICIPAL FEE    \$ \_\_\_\_\_

DATE: \_\_\_\_\_

TRAINING FEE    \$ \_\_\_\_\_

PERMIT NO. \_\_\_\_\_

**TOTAL PERMIT FEE**    \$ \_\_\_\_\_