CONEWAGO TOWNSHIP

APPLICATION FOR BUILDING PERMIT/ USE CERTIFICATE

PENNSYLVANIA UNIFORM CONSTRUCTION CODES ENFORCED RESIDENTIAL **2018 IRC**

1. Property Information

Tax Map: Site A	Address				
Parcel No.: 2. Owners Information		City	State	Zip	
First Name: Last	Last Name or Business:		Phone No. / Cell No.		
Street Address: City: 3. Contractor Information	State	e: 2	Z ip:		
Name of Contractor A Copy of AWorkman=s Compensation@ Insura	ddress Ci		Zip Phone N/A Affidavit		
Person in charge of Work:		Phon	e No		
New Building Addition Foundation Only Change of U 4. Building Plot Plan (On a separate sheet of paper provide a de All other buildings, well and septic systems to Zone: Agricultural 30% Conserwing = Maximum lot imperior Minimum Setbacks: Front Ft. Tot Minimum Setbacks: Front Ft. Side_ Use by Right? Yes No Use by Spect Description of Work: (2- Sets of Construction December 1)	se Plumbing Netailed plot plan showing be shown with dimension wation 20% R1 ervious coverage = any al Lot Coverage: All Ft. Rear Final Exception? Yes	Mechanical Electric Electri	cuction within the basery line, and total 50% Villageone not impervious vious Surfaces	l lot impervious coverage., 70% Sq. Ft% No	
Description of Building Use (<i>Check One</i>) One-Family Dwelling (R3)	Two-family	y Dwelling (R3)	Accessor	ry Structure	
Does or will your building/ project contain Elevator/Escalator/Lifts/Moving walks: (6 Sprinkler System: Yes No. 10	Check) Yes	No	sNo		
Building Dimensions Existing Building Area:	Sq. Ft. Numb	er of Stories:			
Proposed Building Area:	Sq. Ft. Height	of Structure Above	e Grade:	Ft.	
Total Building Area:	Sq. Ft. Area o	f the Largest Floor	·	Sq. Ft.	
Estimated Start Date:	Estimated Ler	ngth of Project :			

ESTIMATED COST OF PROJECT (reasonable fair market value):\$___

5. Zoning Requirements:		
Copy of the Uniform Construction Code Certificate of Approval N Copy of Sewage Installation / Repair / Alteration Permit Type:	No.: Date:	
Copy of Driveway Permit Type: Twp PenDot	Permit No	
Copy of Public Water application if applicable:Priv	ate/ WellOther	
Attach On lot Storm Water Management Plan / Approved See Attach Written Soil Erosion Plan- Required if more than 5000S Attach Soil Conservation Review- if more than 1 acre + FLOOD PLAIN Is the site within an identified flood hazard area? (Check One) _ Will any portion of the flood hazard area be developed? (Check One) Owner/Agent shall verify that any proposed construction and/or dwhich are subject to flooding must comply with the requirements Lowest Floor Level HISTORIC DISTRICT Is the site located in a Historic District? Yes No If construction is proposed within a Historic District, a certifications The applicant certifies that all information on this application is correconstruction documents and PA ACT 45 (Uniform Construction Cod	YesNo Ne)YesNoN/A evelopment activity within the areas of Conewago Township of Ordinance Number 319. eel: atte of appropriateness may be required by the Municipality. eet and the work will be in accordance with the Aapproved@	
adopted by the Municipality. The property owner and applicant assure easements, rights- of way, flood areas, etc. Issuance of a permit and a authority to violate, cancel or set aside any provisions of the codes or applicant certifies he/she understands all the applicable codes, ordina Application for a permit shall be made by the <i>owner</i> and or lessee <i>design professional</i> employed in connection with the proposed work. I certify that the code administrator or the code administrator=s areas covered by such permit at any reasonable hour to enforce to	approval of construction documents shall not be construed as ordinances of the Municipality or any other governing body. The nees and regulations. of the building or structure, or agent of either or by the registered authorized representative shall have the authority to enter	
Signature of Owner & Authorized Agent	Print Name of Owner & Authorized Agent	
Address ***********************************	Date	
For Office Use	Application Fee: <u>\$ 70.00</u>	
Application Date	CTWP- Permit Fee:	
PERMIT NO:		
APPLICATION IS: GRANTED DENIED	CCIS Administration Fee:	
ISSUANCE DATE: EXPIRATION DATE:	Inspection Fee:	
DI AN DEVIEWED	Construction Review Fee:	
PLAN REVIEWER		
	Total:	
SIGNATURE OF PERMIT OFFICER/BCO	DATE	

APPLICANT OR AUTHORIZED AGENT RESPONSIBLE FOR CONTACTING CODES OFFICER

PHONE NO. 266-2122 CONEWAGO TOWNSHIP 490 COPENHAFFER RD. YORK PA. 17404 FAX NO. 266-2697