

North Versailles Township

Application for Building / Zoning Permit

I. Location of Building	Location: _____ Zoning District: _____ Subdivision: _____ Lot and Block No.: _____ Lot Size: _____
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II. Type and Cost of Building – All applicants complete Parts A – D

<p>A. Type of Improvement</p> <p>1) <input type="checkbox"/> New Construction ***</p> <p>2) <input type="checkbox"/> Addition</p> <p>3) <input type="checkbox"/> Alteration</p> <p>4) <input type="checkbox"/> Repair, replacement</p> <p>5) <input type="checkbox"/> Demolition</p> <p>*** - SEE NOTICE BELOW</p>	<p>D. Proposed Use – (For Demolition, list most recent use)</p> <table style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> <p>Residential</p> <p>9) <input type="checkbox"/> One Family</p> <p>10) <input type="checkbox"/> Two or more family – Enter Number of units _____</p> <p>11) <input type="checkbox"/> Garage</p> <p>12) <input type="checkbox"/> Carport</p> <p>13) <input type="checkbox"/> Swimming Pool</p> <p>14) <input type="checkbox"/> Fence</p> <p>15) <input type="checkbox"/> Deck</p> <p>16) <input type="checkbox"/> Other – Specify _____</p> <p>_____</p> <p>_____</p> <p>_____</p> </td> <td style="width: 50%; vertical-align: top;"> <p>Non-Residential</p> <p>17) <input type="checkbox"/> Amusement, Recreation</p> <p>18) <input type="checkbox"/> Church, other religious</p> <p>19) <input type="checkbox"/> Industrial</p> <p>20) <input type="checkbox"/> Service Station</p> <p>21) <input type="checkbox"/> Repair Garage</p> <p>22) <input type="checkbox"/> Office, Bank, Professional</p> <p>23) <input type="checkbox"/> Public Utility</p> <p>24) <input type="checkbox"/> School, other education</p> <p>25) <input type="checkbox"/> Stores, Mercantile</p> <p>26) <input type="checkbox"/> Cellular Tower, Water Tank</p> <p>27) <input type="checkbox"/> Other – Specify _____</p> <p>_____</p> </td> </tr> </table>	<p>Residential</p> <p>9) <input type="checkbox"/> One Family</p> <p>10) <input type="checkbox"/> Two or more family – Enter Number of units _____</p> <p>11) <input type="checkbox"/> Garage</p> <p>12) <input type="checkbox"/> Carport</p> <p>13) <input type="checkbox"/> Swimming Pool</p> <p>14) <input type="checkbox"/> Fence</p> <p>15) <input type="checkbox"/> Deck</p> <p>16) <input type="checkbox"/> Other – Specify _____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Non-Residential</p> <p>17) <input type="checkbox"/> Amusement, Recreation</p> <p>18) <input type="checkbox"/> Church, other religious</p> <p>19) <input type="checkbox"/> Industrial</p> <p>20) <input type="checkbox"/> Service Station</p> <p>21) <input type="checkbox"/> Repair Garage</p> <p>22) <input type="checkbox"/> Office, Bank, Professional</p> <p>23) <input type="checkbox"/> Public Utility</p> <p>24) <input type="checkbox"/> School, other education</p> <p>25) <input type="checkbox"/> Stores, Mercantile</p> <p>26) <input type="checkbox"/> Cellular Tower, Water Tank</p> <p>27) <input type="checkbox"/> Other – Specify _____</p> <p>_____</p>
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<p>B. Ownership</p> <p>6) <input type="checkbox"/> Private (individual, corporation, Nonprofit institution, etc.)</p> <p>7) <input type="checkbox"/> Public (Federal, State, or Local)</p>			
<p>C. Cost (for Business Tax Purposes)</p> <p>8) Cost of Construction:</p> <p>\$ _____</p>			

NOTICE: Be advised that there shall be **NO** occupancy of these premises until such time as the Code Enforcement Officer has certified that all work has been completed in full compliance with the requirements of the Building Permit and accompanying plans, specifications and documents and has issued the Occupancy Permit accordingly.

Non-Residential – Describe in detail proposed use of buildings, e.g. machine shop, laundry, rental office building, office building, etc. If use of existing building is being changed, enter proposed use:

III. Selected Characteristics of Building – For demolition, completed Part G. ALL others complete Parts E, F, & G

<p>E. Principal Type of Frame & Finish</p> <p>28) Frame – Specify type _____</p> <p>29) Exterior Finish – Specify type _____</p>	<p>F. Miscellaneous</p> <p>Will there be central air conditioning?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Will there be an elevator?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>G. Dimensions</p> <p>Number of stories _____</p> <p>Total square feet of floor area, all floors, based on exterior dimensions: _____</p> <p>Number of parking spaces: _____</p>
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Setback Information – Distance of construction from property lines:

Front _____ Back _____ Right _____ Left _____

Identification – To be completed by all applicants

Name	Address	Phone
Owner or Lessee		
Contractor PA Contractor Number		
Architect or Engineer		

A copy of the contractor's workers' compensation certificate must be filed with this office in order to receive a Building Permit
 A copy of the contractor's Pennsylvania Home Improvement Contractor License must be filed with this office in order to receive a Building Permit

I hereby certify that the proposed work is authorized by the owner of record and that I am said owner or that I have been authorized by the owner to make this application as his authorized agent and I/we agree to abide by the Zoning and Building Code of the Township of North Versailles and to conform to all applicable ordinances, regulations, and laws of the Municipality and the state of Pennsylvania.

Signature of Applicant	Address	Phone
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DO NOT WRITE BELOW THIS LINE

Plans Review Record – For Office Use

Plans Review Required	Check	Date Received	By	Date Approved	By	Notes
Building						
Site Plans						
E & S						
Landscaping						
Other						

Additional Permits Required or Other Jurisdiction Approvals

Permit or Approval	Check	Date Obtained	Number	By

Validation

Building Permit Fee \$ _____ Date Paid _____ Building Permit # _____ Date Issued _____
 Occupancy Permit Fee \$ _____ Date Paid _____ Date Issued _____

APPROVED BY:

_____ Building Inspector _____ Code Enforcement Officer