

Instructions for Porch, Patio or Deck.

*Required Fields

***Applicant :** Full name and mailing address with a minimum of one contact number.

Owner : Only needed if different than the above applicant.

***Contractor :** Name of person or company who will perform the construction duties of said building. Complete address and a minimum of one contact number is required. If work is to be performed by owner/applicant then put **self** on this line.

***Location :** Physical address where building will be built.

Subdivision : Your plan or development, if known.

Parcel : If known

Zoning : Determined by Community Development Department.

Tax Map Number : Starts with 55 and can be found on your property tax documents.

Size of Lot : Length & width dimensions of subject property in feet.

Deed Book : Not applicable.

Volume : Not applicable.

Owned Since : Date of purchase of subject property by current owner.

***Type of Sewage :** Check appropriate box. On lot refers to septic tanks, sand mounds, etc... Public is serviced by P.T.S.A. or another municipal service.

***Type of Water :** Check applicable box. Private refers to wells, cisterns, etc... Public is serviced by M.A.W.C. etc...

***Project Description :** Under residential check box # 05 labeled porch, patio, deck

***Cost of Improvement :** This is the total cost of materials and labor to bring the project to a completed state.

***Building Measurements :** These are the dimensions in length, width and height of the finished structure. Measurements must be in feet and inches.

***Square Footage of Proposed Structure :** Multiply structures finished length by it's finished width to arrive at this measurement in square feet.

***Plot Plan :** This is a detailed and accurate drawing (may be hand drawn) of the subject property that shows all property lines and dimensions, all building locations and dimensions, all accessory structures and dimensions along with proposed building location on lot with dimensions from building location to lot lines and existing structures. **These dimensions must be accurate.**

***Two Complete Sets of Building Plans :** Please provide a construction drawing of the proposed structure. (This may be hand drawn for decks only. see example at end of instructions)

***Copy of Deed for Property :** If deed is not available, proof of ownership in the form of property tax receipt is acceptable.

Copy of Workers Compensation Insurance : If a contractor with employees will be performing work on the building, proof of insurance will be required.

Completed Excavation Permit : After review of completed building permit, you will be notified if this step is necessary.

Impact Fee : Not applicable.

PA One Call Serial # : Before any excavation work is performed, you should notify them at the listed number. They in turn will give you a call serial number, record it here.

***Application must be signed and dated to be considered complete.**

No application will be processed without the required fields completed.

Permit Fees : \$50.00 Residential decks, patio Enclosures, porch roofs, less than 200 sq. ft.

\$100.00 Residential structure in excess of 200 sq. ft.
plus **\$0.25** per Sq. ft.

PENN TOWNSHIP

BUILDING PERMIT APPLICATION

Both sides of application to be completed

APPLICANT		
NAME _____		
ADDRESS _____		
CITY _____	STATE _____	ZIP _____
PHONE () _____		
ALTERNATE PHONE () _____ CELL PHONE () _____		
FAX () _____ PAGER () _____		

OWNER (IF SAME AS APPLICANT CHECK <input type="checkbox"/>)		
NAME _____		
ADDRESS _____		
CITY _____	STATE _____	ZIP _____
PHONE () _____		
ALTERNATE PHONE () _____ CELL PHONE () _____		
FAX () _____ PAGER () _____		

CONTRACTOR (IF SAME AS APPLICANT CHECK <input type="checkbox"/>)		
NAME _____		
ADDRESS _____		
CITY _____	STATE _____	ZIP _____
PHONE () _____		
ALTERNATE PHONE () _____ CELL PHONE () _____		
FAX () _____ PAGER () _____		

LOCATION		
PROPERTY LOCATED AT _____		CITY _____ ZIP _____
BETWEEN _____	AND _____	
(Cross Street)		(Cross Street)
SUBDIVISION _____	PARCEL # _____	ZONING _____
TAX MAP # 55- _____ - _____ - _____ - _____		SIZE OF LOT _____
DEED BOOK _____	VOLUME _____	OWNED SINCE _____

<u>TYPE OF SEWAGE</u>	<u>TYPE OF WATER</u>
<input type="checkbox"/> ON LOT	<input type="checkbox"/> PRIVATE
<input type="checkbox"/> PUBLIC	<input type="checkbox"/> PUBLIC
<input type="checkbox"/> NOT APPLICABLE	<input type="checkbox"/> NOT APPLICABLE
SEWAGE VERIFICATION REQUIRED AT TIME OF BUILDING PERMIT ISSUANCE	

PROJECT DESCRIPTION

RESIDENTIAL

- 01 HOUSE
- 02 ADDITION
- 03 REMODELING
- 04 GARAGE
- 05 PORCH, PATIO, DECK
- 06 SWIMMING POOL
- 07 SHED OR STORAGE

COMMERICAL (BUSINESS)

- 10 BUILDING
- 11 ADDITION
- 12 REMODLING

(INDUSTRIAL)

- 20 BUILDING
- 21 ADDITION
- 22 REMODELING

OTHER

- 60 CELL TOWER
- 60 TANK
- 60 MISC. (DESCRIBE) _____
- 60 EXEMPT BUILDING _____
- 70 DEMOLITION

COST OF IMPROVEMENT _____

BUILDING MEASUREMENTS

Length _____

Width _____

Height _____

SQUARE FOOTAGE OF PROPOSED STRUCTURE

BASEMENT _____

1ST FLOOR _____

2ND FLOOR _____

DECK _____

GARAGE _____

OTHER ENCLOSED AREAS _____

TOTAL _____

IN ADDITION TO THIS APPLICATION THE FOLLOWING IS REQUIRED

- _____ PLOT PLAN (must match building plans for proposed structure)
- _____ Two complete sets of building plans
- _____ Copy of Deed for property
- _____ Copy of Workers Compensation Insurance (If applicable)
- _____ Completed excavation permit application (If applicable)
- _____ Impact fee calculation and participation agreement (If applicable)
- _____ **PA ONE CALL** serial # _____
(1-800-242-1776)

Building permit fee is to be paid when permit is issued

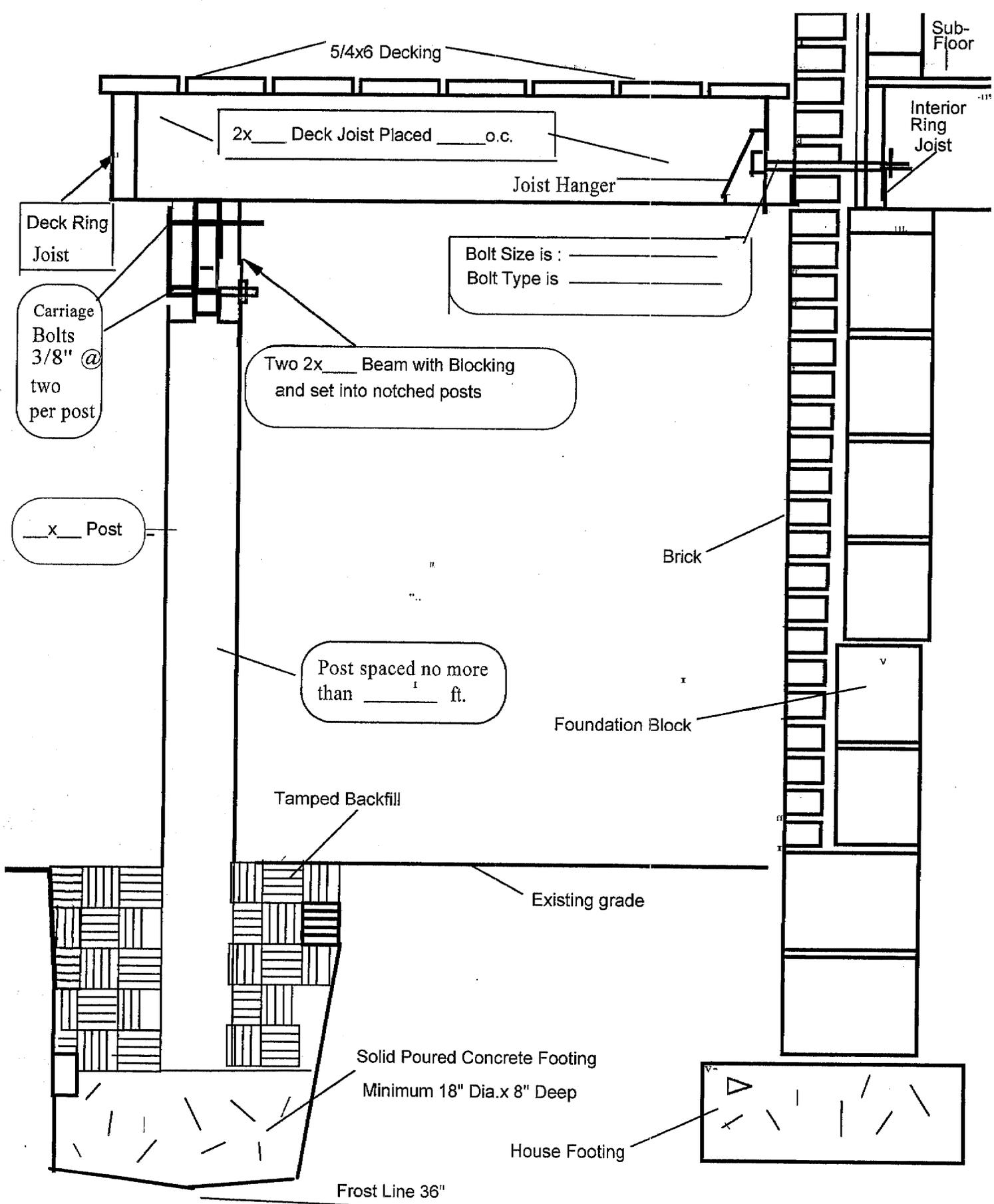
Applications that are incomplete or that do not contain all the requested information will be rejected until the requested information or documentation is received. All building permits require a FIFTEEN DAY (15) review time from the date that the application is complete.

Please note!

*Construction hours in Penn Township are from 7:00 AM to 9:00 PM.
The burning of construction materials is prohibited in Penn Township.*

Signature of Person Completing This Form

DATE _____/_____/_____



Deck Construction Elevation

4X4 NEWEL
Posts 7'-0"
MAX SPACING

BALUSTER
SPACING 4"
MAXIMUM

TOP RAIL 36"
HIGH MINIMUM

NEWEL CAP

Top Rail
— x —

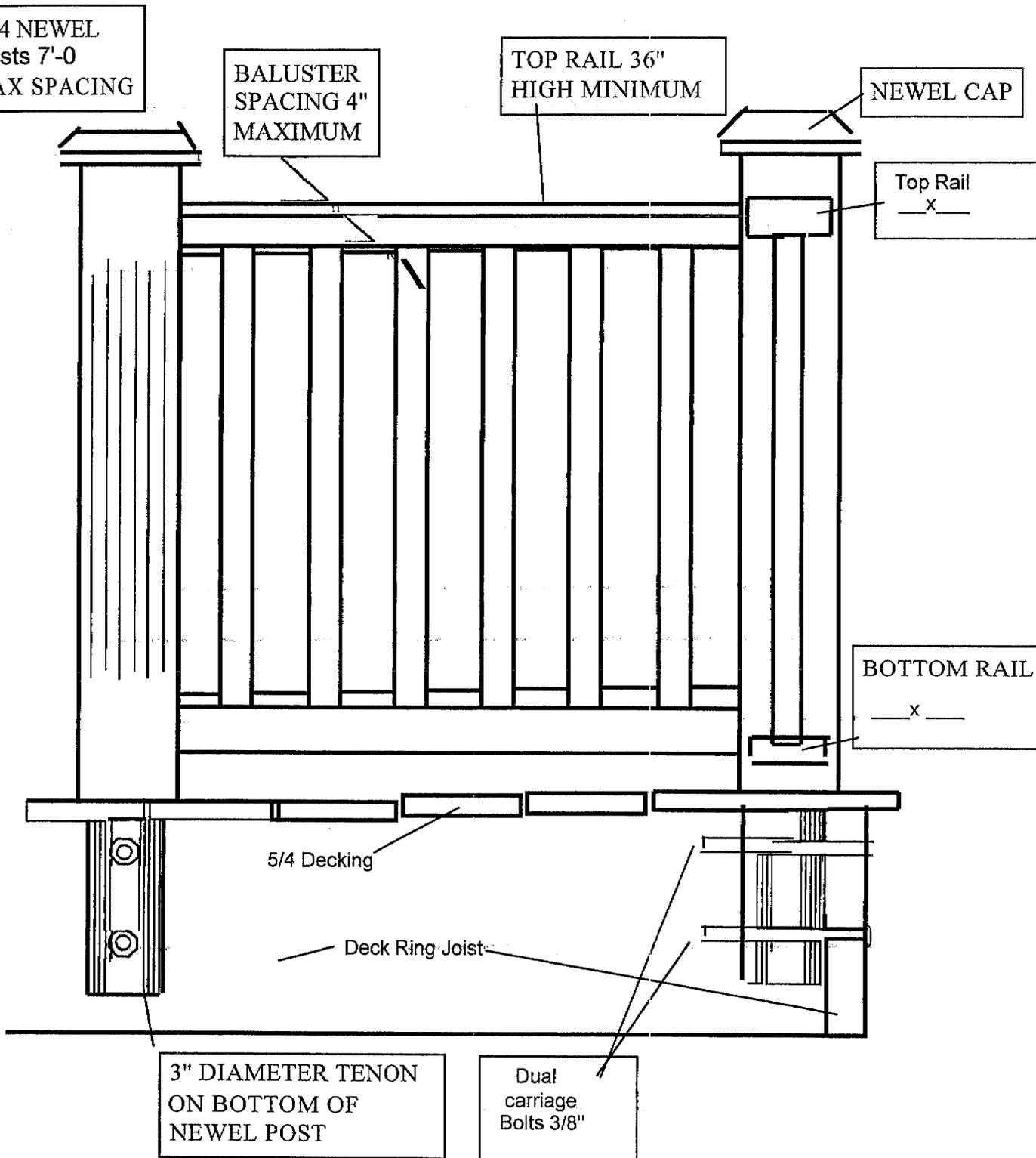
BOTTOM RAIL
— x —

5/4 Decking

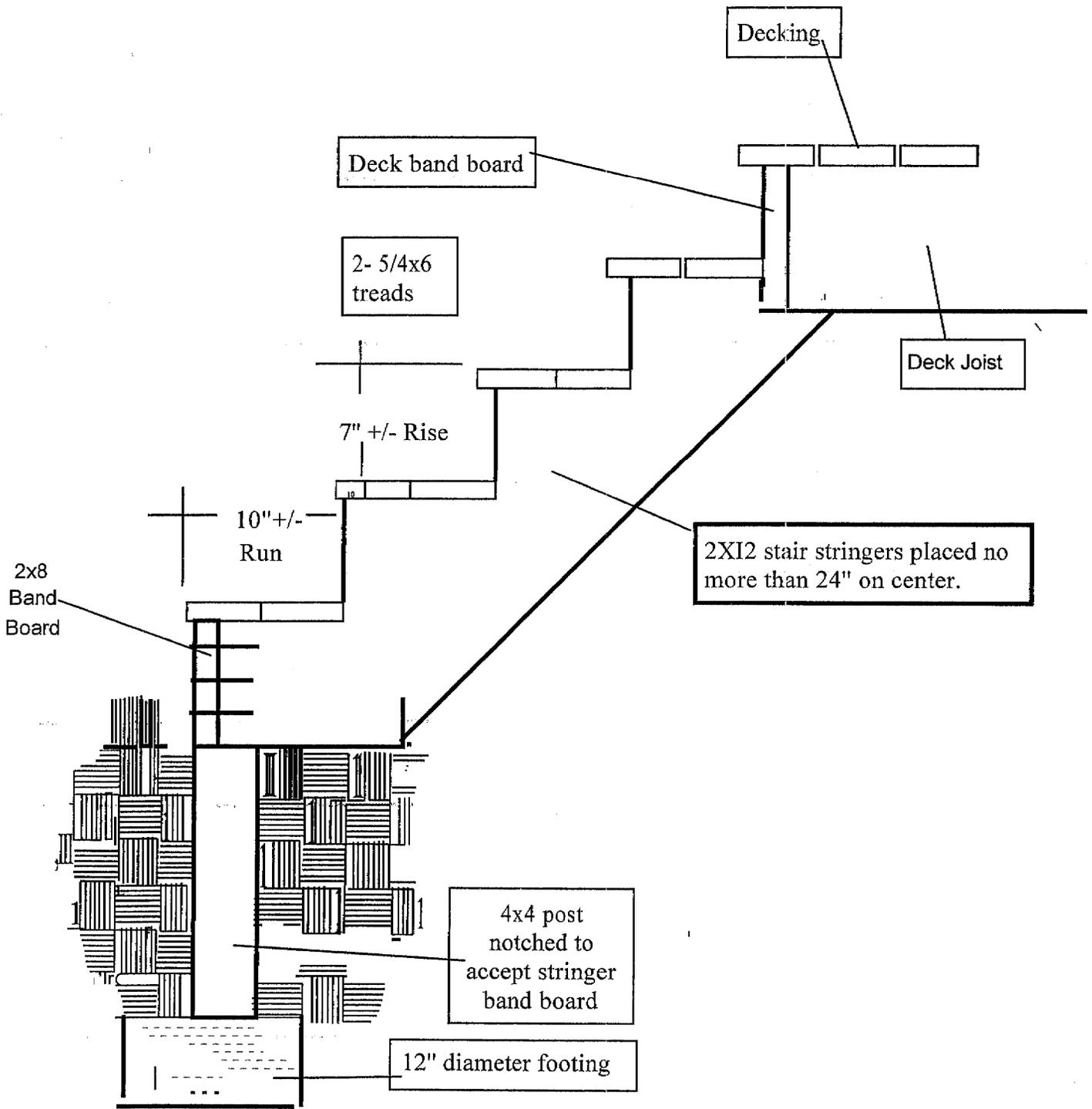
Deck Ring Joist

3" DIAMETER TENON
ON BOTTOM OF
NEWEL POST

Dual
carriage
Bolts 3/8"



Railing Construction Elevation



Stair Construction Elevation