

ATGLEN BOROUGH BUILDING & ZONING PERMIT APPLICATION

120 Main Street * P.O. Box 250 * Atglen, PA 19310
610-593-6854 (phone) * 610-593-6508 (fax)

I. MUNICIPAL USE ONLY			
Date Issued: / /	Permit #	Approved By:	
Permit Fee:	\$	Payment Method	<input type="checkbox"/> Cash <input type="checkbox"/> Check
State Surcharge:	\$	Check #	
Certificate of Occupancy:	\$	When Ready: Mail or Call	
Other Fee:	\$	Date Fee Paid: / /	Collected By:
Total Permit Fees:	\$	Time/Date Stamp when received:	

II. LOCATION OF JOB		
Site Address:		
Cross Streets:		and
Subdivision Name:		Lot Number:
Block:	Unit:	Zoning District:

III. PERMIT-TYPE OF WORK (one per application)	
<input type="checkbox"/> Building	<input type="checkbox"/> Zoning
<input type="checkbox"/> Residential	<input type="checkbox"/> Commercial <input type="checkbox"/> Agricultural
Flood Zone-Choose One	<input type="checkbox"/> AE <input type="checkbox"/> X OA (Other Areas)
<input type="checkbox"/> New Home <input type="checkbox"/> New Building <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Pool <input type="checkbox"/> Fence <input type="checkbox"/> Deck <input type="checkbox"/> Porch <input type="checkbox"/> Shed <input type="checkbox"/> Mechanical <input type="checkbox"/> Plumbing <input type="checkbox"/> Demolition <input type="checkbox"/> **Electrical** <input type="checkbox"/> Other _____	
Description of Work:	Total Project Cost: \$

IV. OWNER Email-	
Name:	Day Time Phone #: ())
Address:	City, State, Zip:

V. APPLICANT Email-		<input type="checkbox"/> CHECK IF SAME AS OWNER
Name:	Relationship to Owner:	
Address:	Day Time Phone #: ())	
City, State, Zip:	Fax Number: ())	

VI. CONTRACTOR		Email-	<input type="checkbox"/> CHECK IF SAME AS APPLICANT/OWNER
Name:			
Address:		Day Time Phone: ()	
City, State, Zip:		Fax Number: ()	

VII. WORKERS' COMPENSATION INSURANCE COVERAGE INFORMATION	
THE APPLICANT IS: THE OWNER OF THE PROPERTY? <input type="checkbox"/> Yes (if yes GO TO BOX A) <input type="checkbox"/> No (if no GO TO BOX B)	
BOX A. SIGN HERE & GO TO STEP VIII:	
BOX B. CONTINUE FILLING OUT SECTION VII: THE APPLICANT IS: A CONTRACTOR WITHIN THE MEANING OF THE PENNSYLVANIA WORKERS' COMPENSATION LAW? <input type="checkbox"/> Yes or <input type="checkbox"/> No If yes, provide a Certificate of Insurance (Continue to Box C)	
BOX C. SIGN HERE & GO TO STEP VIII:	

VIII. APPLICANT'S SIGNATURE	
I HEREBY CERTIFY THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER OF RECORD AND THAT I AM THE HOMEOWNER OR HAVE BEEN AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION AS HIS/HER AUTHORIZED AGENT AND WE AGREE TO ALL APPLICABLE LAWS OF THIS JURISDICTION.	
Applicant Name (print): _____	Date: _____/_____/_____
Applicant Signature: _____	

All Applicants constructing a new structure or addition MUST complete Sections IX and X

IX. SITE INFORMATION AND BUILDING INFORMATION	
Water Service: <input type="checkbox"/> Public <input type="checkbox"/> Private	Sewer Service: <input type="checkbox"/> Public <input type="checkbox"/> Private
Fuel Source: <input type="checkbox"/> Electric <input type="checkbox"/> Natural Gas <input type="checkbox"/> LPG Gas <input type="checkbox"/> Oil <input type="checkbox"/> Other (List)	
Building Code Use Group:	Specific Use:
Change in Use Yes No - If Yes attach Change of Occupancy Form.	
Existing Building Area (In Square Feet):	Proposed Building Area (In Square Feet):
Total Building Area (In Square Feet):	
Height of Structure Above Grade:	Number of Stories:
Maximum Occupancy Load (Commercial Applications Only):	

Maximum Live Load (Commercial Applications Only):		
Is Building equipped with an Automatic Sprinkler System?	Yes	No
Code Edition:		

X. DRAW SITE/PLOT PLAN HERE OR ATTACH DRAWING FOR ALL ADDITIONS, NEW STRUCTURES, DECKS, FENCES, MAILBOXES, AND SHEDS

A Site/ Plot Plan MUST be included showing all street locations (if a corner lot show both streets), all setbacks from property lines to proposed work, and all easements, right of ways, basins and any other restricted features on site. If property is governed by a Homeowner's Association, if required, an approval letter must be attached for all exterior improvements.

XII. WORKERS COMPENSATION EXEMPTION

IF DECLARING AN EXEMPTION THIS MUST BE COMPLETED BY A NOTARY PUBLIC.

The undersigned swears or affirms that he/she is not required to provide workers' compensation insurance under the provisions of the Pennsylvania Workers' Compensation Law for one of the following reasons:

- Contract with no employees. Contractor prohibited by law from employing any individual to perform work. Pursuant to this building permit unless contractor provides proof of insurance to Atglen Borough
- Religious exemption under the PA Workers Compensation Law.

Subscribed and sworn to before me this _____ day of _____, 20 _____

Signature of Notary Public

(Seal)

My commission expires: _____

Applicant Name: _____

Applicant Signature: _____

Applicant Address: _____

INSTRUCTIONS

- As provided in the Code, the Building Code Official may require additional engineering or design information to determine compliance with the applicable Codes.
 - The permit application will be dated when it is submitted and will be reviewed **within 14 business days for residential work and 30 business days for commercial work**. When planning the project allow for this review period.
 - If your application is missing any required documents or is incomplete, it will be denied. When the application becomes complete you may resubmit your application and the review period will start over.
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1. SECTION I - Municipal Use Only. Applicant will not complete.
2. SECTION II - Location of Job
 - Fill out as much as you know. The staff will assist.
3. SECTION III - Permit Type:
 - Select Building and/or Zoning. Many permits require both.
 - Select Either: Residential, Commercial or Agricultural
 - Flood Plain Designation: Select which zone you are in (AE-100yr floodplain, X-500yr flood plain, & OA-Other Areas (or not in flood plain)
 - Type of work or improvement: Check box that applies to your type of permit. Describe type of work you will be doing.
 - Fill in Total Cost of Job - (estimate if necessary).
4. SECTION IV – Owner
 - Fill in Owner information. Provide a day time phone number.
5. SECTION V – Applicant
 - If the Owner is the applicant check the box that reads “same as owner” and move to Section VI.
 - If not the Owner fill in Applicant information. Provide a day time phone number.
6. SECTION VI – Contractor
 - If the Owner or Applicant check the box that reads “same as Applicant/Owner” move to Section VII.
 - If not Owner or Applicant fill in contractor information. Provide a day time phone number.
7. SECTION VII - Workers Compensation Insurance Information
 - If Owner check Yes, sign Box A, and move to Section VII
 - If Not the Owner check No, go to Box B and fill in the information, then sign Box C.

8. SECTION VIII – Applicant’s Signature and Workers Compensation
 - All Applicants (Owner or Contractor) MUST sign, date, and print your name.
9. SECTION IX – Site Information and Building Information
 - Fill in the information for a new structure or addition.
10. SECTION X - Draw or attach plot/site plan.
 - This is required for all permits with the exception of roofing and interior alterations. If your site has unique easements or other potential conflicts for your project, we reserve the right to require an engineered survey even for simple projects such as decks and pools.
11. SECTION XI – Workers’ Compensation Exemption
 - If you are a Contractor and do NOT have Workers’ Compensation Insurance you MUST have this Section notarized.
12. PLANS SUBMITTED WITH THE PERMIT APPLICATION
 - A. New house - 3 complete sets.
 - B. Residential Garage - 2 sets showing complete dimensions, footings, and structural member sizes.
 - C. Non-Residential Building - 3 complete sets signed and sealed by Design Professional. Structural drawings must be signed and sealed by a Design Engineer. Stamped Electrical Plans from an Electrical Inspection Agency.
 - D. Additions and Alterations for Residential - 3 sets showing complete dimensions, footings, and structural member sizes.
 - E. Additions for Non-Residential - 3 sets of engineered plans and third party agency approval with signature on the electrical plan.
 - F. Sheds/Accessory Buildings - 2 sets detailing size, typical construction and method of installation.
 - G. Fences and Mailbox – 1 set, plot plan with description of material, height of fence, height of mailbox post.
 - H. Pool - 2 sets showing location and all pertinent design information also see additional pool requirements for details.
 - I. Decks, Porches, Patios - 3 sets of drawings showing footings, connections and dimensions on all components.
13. FEES AND TIME PERIOD FOR PERMIT TO REMAIN ACTIVE
 - The fees will be computed by the Borough staff or Building Official and reviewed with you. You must pay for the permit prior to receiving the permit declaration page.
 - Once a permit is issued you must start work within 6 months and finish the project within 2 years.