



# SKIPACK TOWNSHIP

[www.skipacktownship.org](http://www.skipacktownship.org)

4089 Heckler Road - P.O. Box 164

Skipack, PA 19464

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## APPLICATION FOR PLAN EXAMINATION AND BUILDING PERMIT

APPLICANT INSTRUCTIONS: For all applications, complete Parts 1,2,3,4 and 5 of this form. If electrical work, complete also Part 6. If plumbing work, complete also Part 7. If mechanical work, complete also Part 8. For other permits, complete also Part 9. Site Plan (part 10) is to be shown on Page 4 or attached hereto. Parts 11-18 (pages 5 and 6) are for department use only.

App. Date:	Type of Permit:	Electrical (E)	Plumbing (P)	Is Property Owner
	Building (B)	Mechanical (M)	Other (O)	Applicant: Y/N

### 1. PROPERTY INFORMATION

Address: \_\_\_\_\_

Parcel Number: \_\_\_\_\_ Zoning: \_\_\_\_\_

Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_

Parcel Type: Residential (R) Industrial (I) Commercial (C) Other (O)

### 2. OWNER INFORMATION

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Business Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

### 3. CONTRACTORS INFORMATION

	NAME OF CONTRACTOR – ADDRESS – CITY, STATE, ZIP	LICENSE NO:
Applicant (not owner)		
Architect/Engineer		
General Contractor		
Excavation		
Concrete		
Carpentry		
Electrical		
Plumbing		
Sewer		
Mechanical		

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<b>Structural</b> (check all that apply) <b>Frame</b> Steel (1)      Concrete (3)      Other (5), Identify: Masonry (2)      Wood (4)			<b>Exterior</b> (check all that apply) <b>Walls</b> Steel (1)      Concrete (3)      Other (5), Identify: Masonry (2)      Wood (4)		
Are any <b>structural assemblies</b> fabricated off-site?			Yes	No	

Street Frontage (Feet)	Stories (Number)	Lot Area (Sq. feet)
Front Setback (Feet)	Bed Rooms (Number)	Building Area (Sq. feet)
Rear Setback (Feet)	Full Baths (Number)	Parking area (Sq. feet)
Left Setback (Feet)	Partial Baths (Number)	Living area (Sq. feet)
Right Setback (Feet)	Garages (Number)	Basement Area (Sq. feet)
Height Above Grade (Feet)	Windows (Number)	Garage Area (Sq. feet)
New Residential Units (Number)	Fireplaces (Number)	Office/Sales (Sq. feet)
Existing Residential Units (Number)	Enclosed Parking (Number)	Service (Sq. feet)
Elevators / Escalator (Number)	Outside Parking (Number)	Manufacturing (Sq. feet)
Est. Start	Est. Finish	Building Est. Value \$

### 6. ELECTRICAL PERMIT APPLICATION

<b>Electrical Work</b>		<b>Yes</b>	<b>No</b>				
Total Service	AMPS	Number of Circuits:		2 WIRE	3 WIRE	Number of Service Outlets:	
		4 WIRE				110 V	220V
	<b>POWER DEVICES</b>	<b>No.</b>	<b>OUTPUT/LOAD</b>		<b>POWER DEVICES</b>	<b>No.</b>	<b>OUTPUT/LOAD</b>
<b>1</b>				<b>7</b>			
<b>2</b>				<b>8</b>			
<b>3</b>				<b>9</b>			
<b>4</b>				<b>10</b>			
<b>5</b>							
<b>6</b>				<b>TOTAL NUMBER OF MOTORS</b>			
Utility Service Revisions:							
Est. Start			Est. Finish			Electrical Work Est. Value \$	

### 7. PLUMBING PERMIT APPLICATION

<b>Plumbing Work</b>		<b>Yes</b>	<b>No</b>				
<b>Enter the Number of Fixtures Being Installed, Replaced or Repaired</b>							
Tub/showers		Drinking Fountains		Back Flow Preventors			
Shower Stalls		Floor Drains		Water Pumps			
Lavatories		Water Heaters		Roof Openings			
Toilets		Water Softeners		Parking Lot Drains			
Urinals		Sewage Ejectors		Inside Downspouts			
Sinks		Sump Pumps		Swimming Pools			
Laundry Tubs		Grease Traps		Standpipes (Y/N) (Number Hose Outlets)			
Dishwashers		Bidets		Fire Sprinklers (Y/N) (Number of Heads)			

Garbage Disposals				Lawn Sprinklers (Y/N) (Number of Heads)	
				Total Fixtures	
Public Water (Y/N)		Public Sewer (Y/N)			
Water Service Size	IN.	Water Meter Size	IN.	Avg. Daily Water Use	GPD
Utility Service Revisions:					
Est. Start		Est. Finish		Plumbing Work Est. Value \$	

**8. MECHANICAL PERMIT APPLICATION**

**Mechanical Work**      Yes      No

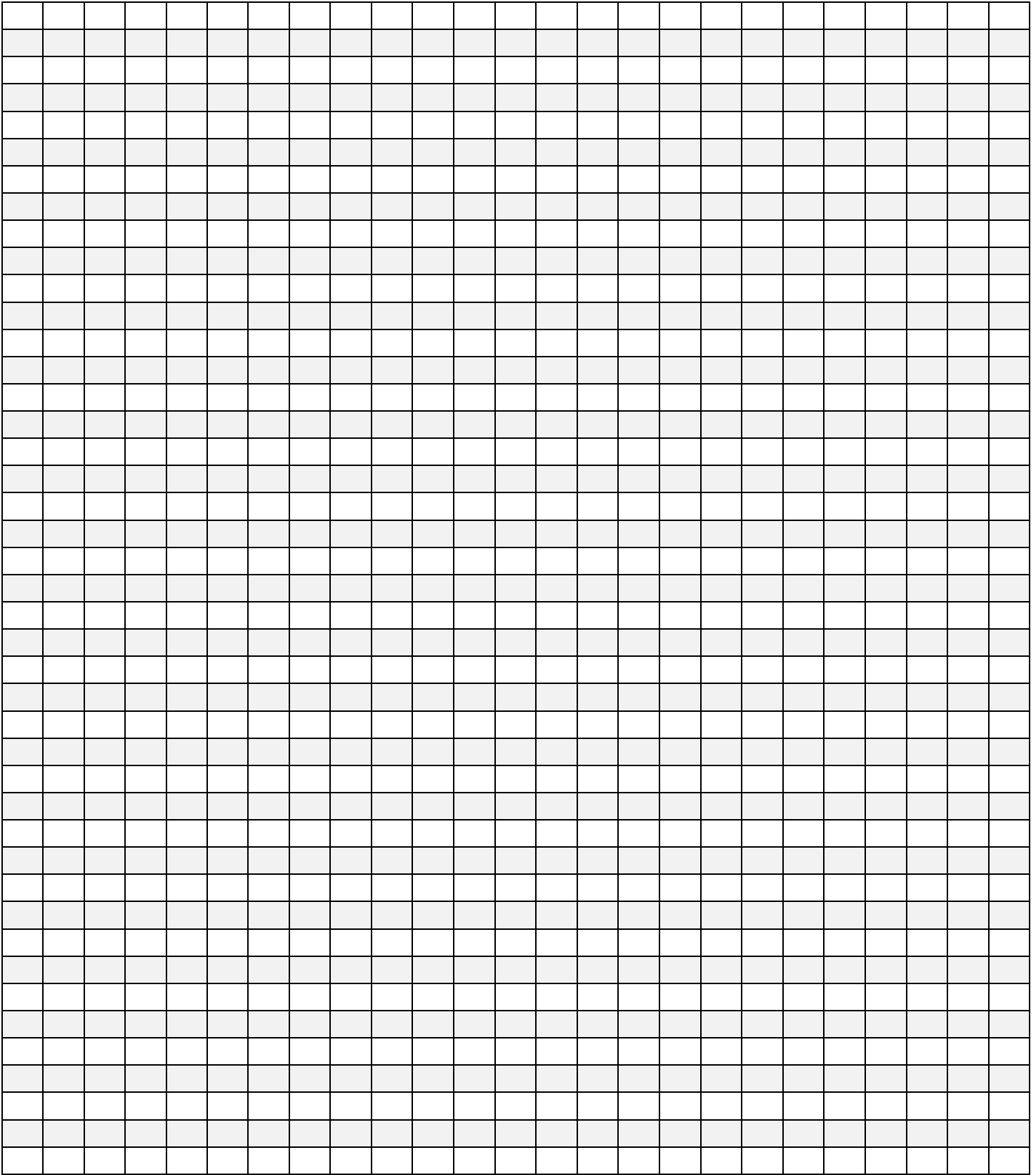
Enter Number of New or Replacement Units					
Forced Air Furnace		Incinerator		Air Handling Unit	
Unit Heater		Boiler		Heat Pump	
Gas/Oil Conversion		Coil Unit		Air Cleaner	
Space Heater		Window A/C Unit		Kitchen Exhaust Hood	
Gravity Furnace		Split System A/C		Hazardous Exhaust System	
Solid Fuel Furnace		A/C Compressor		Electric Furnace	
Utility Service Revisions:					
Type of Heating Fuel: (Check One)      Gas(1)      Oil(2)      Electric(3)      Coal(4)      Wood(5)      Other (6)					
Est Start		Est Finish		Mechanical Work Est. Value \$	

**9. OTHER REQUIRED PERMIT APPLICATION(S)**

Permit Type:		
Description of Work:		
Est. Start	Est. Finish	Est. Value \$

**10. SITE PLAN**

**(Show lot lines, easements, and work layout and dimensions)**



**SCALE = 1 inch = \_\_\_\_\_ FEET**

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