



SKIPACK TOWNSHIP

www.skipacktownship.org

4089 Heckler Road - P.O. Box 164

Skipack, PA 19464

PHONE : 610-454-0909 - fax: 610-454-1385

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		

Cont'd on next page

Roofing		
Masonry		
Drywall or Lathing		
Sprinkler		
Paving		
Fire Alarm		

4. CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT **ADDRESS** **PHONE NO.**

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE **PHONE NO.**

5. BUILDING PERMIT APPLICATION

IMPROVEMENT TYPE:	PROPOSED USE:		
NEW CONSTRUCTION (1) ADDITION (2) ALTERATION (3) REPAIR/REPLACEMENT (4) DEMOLITION (5) RELOCATION (6) FOUNDATION ONLY (7) CHANGE OF USE ONLY (8)	ASSEMBLY THEATRE (1) NIGHT CLUB (2) RESTAURANT (3) CHURCH (4) OTHER ASSEMBLY (5) BUSINESS (6) EDUCATIONAL (GRADES 1-12) (7) DAY CARE FACILITY (8) FACTORY MODERATE HAZARD (9) LOW HAZARD (10) HIGH HAZARD (11)	INSTITUTIONAL GROUP HOME (12) HOSPITAL (13) JAIL (14) MERCANTILE (15) RESIDENTIAL HOTEL, MOTEL (16) MULTI-FAMILY (17) BOCA TWO FAMILY (18) CABO TWO FAMILY (19) BOCA SINGLE FAMILY (20) CABO SINGLE FAMILY (21) STORAGE MODERATE HAZARD (22) LOW HAZARD (23)	OTHER PARKING GARAGE CARPORT MOTOR FUEL SERV. REPAIR GARAGE PUBLIC UTILITY _____ _____ _____ _____ _____ _____ _____ _____ _____ _____

Structural (check all that apply) Frame Steel (1) Concrete (3) Other (5), Identify: Masonry (2) Wood (4)			Exterior (check all that apply) Walls Steel (1) Concrete (3) Other (5), Identify: Masonry (2) Wood (4)		
Are any structural assemblies 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

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

7. PLUMBING PERMIT APPLICATION

Plumbing Work		Yes	No				
Enter the Number of Fixtures Being Installed, Replaced or Repaired							
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

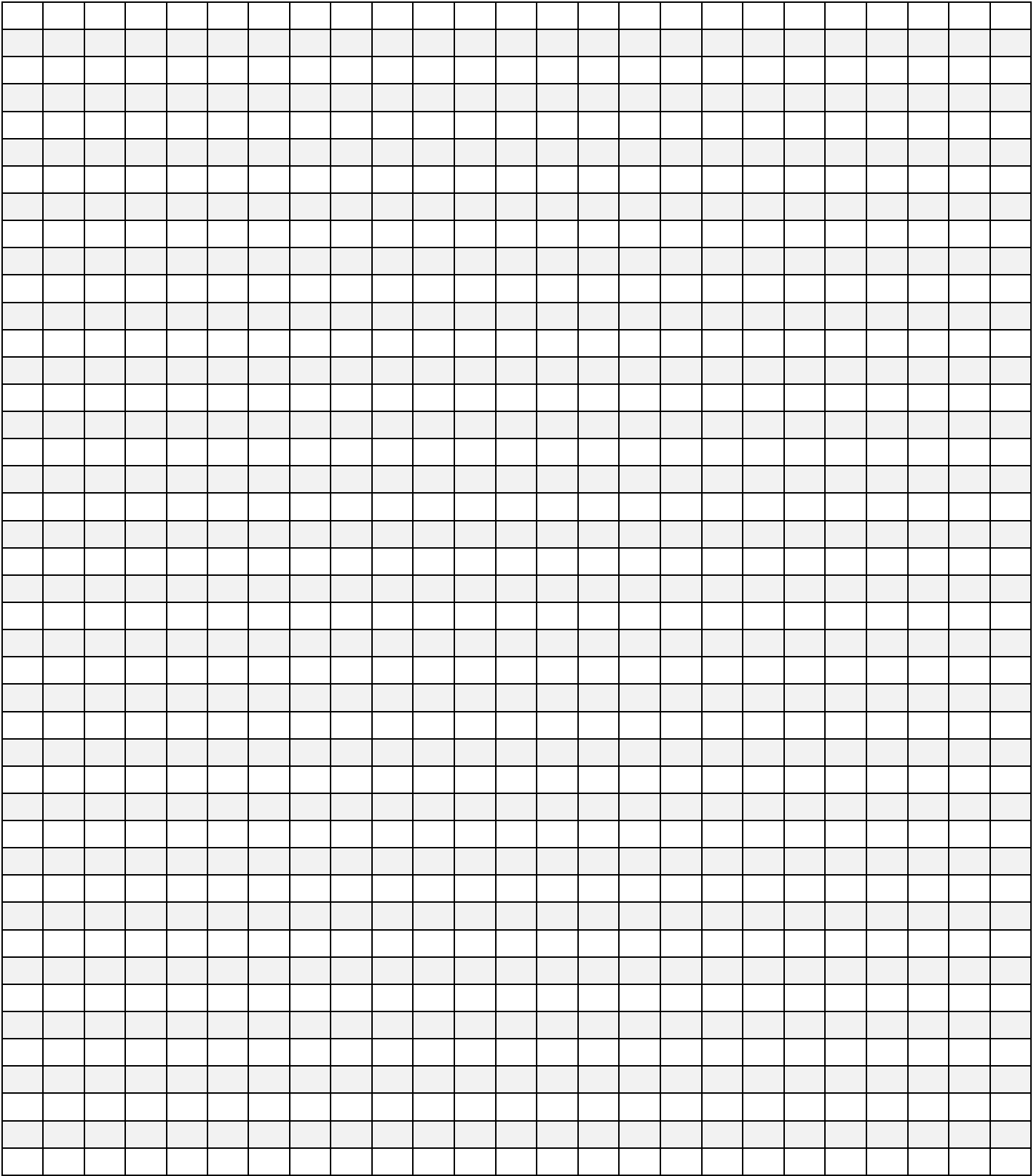
Mechanical Work Yes No

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. REQUIRED DESCRIPTION OF WORK

Required 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

Cont'd on next page