

SEWICKLEY TOWNSHIP BUILDING PERMIT APPLICATION

Both sides of application to be completed

APPLICANT

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

OWNER (IF SAME AS APPLICANT CHECK)

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

CONTRACTOR (IF SAME AS APPLICANT CHECK)

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

LOCATION

PROPERTY LOCATED AT _____ CITY _____ ZIP _____
BETWEEN _____ AND _____
(Cross Street) (Cross Street)
SUBDIVISION _____ PARCEL # _____ ZONING _____
TAX MAP # 58 - _____ - _____ - _____ SIZE OF LOT _____
DEED BOOK _____ VOLUME _____ OWNED SINCE _____

TYPE OF SEWAGE TYPE OF WATER

- ON LOT PRIVATE
 PUBLIC PUBLIC
 NOT APPLICABLE 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

OTHER

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

COMMERICAL (BUSINESS)

- 10 BUILDING
- 11 ADDITION
- 12 REMODLING

(INDUSTRIAL)

- 20 BUILDING
- 21 ADDITION
- 22 REMODELING

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** (1-800-242-1776) serial # _____

Building permit fee is to be paid when permit is issued.
Applications that are incomplete or that do not contain all of the requested information will be rejected until the requested information or documentation is received.

We require a 24 hr. notice on all inspections.

*For an inspection, please call **Mike Stack – Building Inspector (724) 493-7793** Fax (724) 468-0478
 Inspections can only be performed after 5:00pm weekdays and weekends*

DATE _____/_____/_____

Signature of Person Completing This Form