

▶ LAND USE PERMIT CHECKLIST ◀

Additional Sheets Attached: # _____

NOTE TO APPLICANT: Applicable items on this checklist shall be completed prior to your submission of an application for a building permit. Failure to complete any applicable item on this checklist shall be sufficient grounds for denial of the building permit application. Please contact your local municipal office for more information.

Municipality _____ County _____ Tax Parcel I.D. _____ Land Use Permit # _____

Location of Property/Work Site (Complete Address Street City Zip) _____

NAME AND CONTACT INFORMATION OF THE APPLICANT:

Print Full Name _____ Phone (Cell and/or Land line) _____ Email Address _____

Complete Mailing Address: Street/P.O. Box _____ City _____ State _____ Zip _____

PROJECT DESCRIPTION: _____

Type of Construction: Single-Family Dwelling / Duplex Multi Family New Manufactured Home Relocated Manufactured Home
 Commercial Other _____

Improvement Type: New Addition Alteration Repair/Replacement Relocation Other _____

Estimated start date _____ Estimated date of completion _____

Estimated value of construction _____ Number of Additional Bedrooms _____

I certify that I am the owner of record, or that I have been authorized by the owner of record to submit this application and that the work described has been authorized by the owner of record, and I agree to conform to all applicable local, state, and federal laws governing the execution of this project. I certify that the Code Official or his representative shall have the authority to enter the areas in which this work is being performed, at any reasonable hour, to enforce the provisions of the Codes governing this project. I understand and assume responsibility for the establishment of official property lines for required setbacks prior to the start of construction, and agree to conform to all applicable laws of this jurisdiction. I further certify that this information is true and correct to the best of my knowledge. Ref. 18 Pa. Cons. Stat. § 4903.

Applicant's signature _____ Date _____

Checklist of preliminary requirements for obtaining a building permit, approvals to be obtained prior to applying for a building permit. All items must be addressed. Mark N/A for those that are not applicable. Attach extra sheets if necessary to identify special requirements or conditions.

- Sewage facilities planning module, DEP Planning Code # _____ Date of approval _____
- Sub-division & Land Development, Municipal resolution # _____ Date of approval _____
- Sewage permit from Sewage Enforcement Officer, Permit # _____ Date of approval _____
- Storm water management module. Approved by: _____ Date of approval _____
- Conservation District notification per Chapter 102. Date of approval _____
- NPDES Permit # _____ for earth disturbances 1 acre or more, Date of approval _____
- Driveway Permit, Penn DOT # _____ or Local # _____ Date of approval _____
- Public water tap, Permit # _____ Date of approval _____
- Public sewer tap, Permit # _____ Date of approval _____
- Historical Architectural Review Board, Check here for Special conditions. Date of approval _____
- Zoning, Permit # _____ Check here for Special conditions Date of approval _____
- Other; sluice pipe, road alteration, etc. Check here for Special conditions. Date of approval _____
- Floodplain mapping _____ Project may contain flood plain. Date of review _____
- Municipal setback clearances, Check here for Special conditions. Date of approval _____
- Aviation Flight Path or Airport Impact Possible Check here for FAA or Pa DOT approval Date of approval _____
- Extra Pages attached to describe special conditions or circumstance. How many extra pages are attached? _____

{SEAL}

Approved - Municipal Official's Signature & Title _____

Date _____