



# UPPER CHICHESTER TOWNSHIP

PO BOX 2187, UPPER CHICHESTER, PA 19061  
PH: 610-485-5719 FAX: 610-485-3615

TOWNSHIP RECEIVED DATE

## BUILDING PERMIT APPLICATION # \_\_\_\_\_

TYPE OF PROPERTY (Please Circle): Residential Commercial

### PROPERTY INFORMATION: WHERE WORK IS TAKING PLACE

ADDRESS:

Street Apt# City State Zip

## Cost of Construction \$ \_\_\_\_\_

Please provide the cost of construction for the building portion of this project only

SIZE OF PROJECT \_\_\_\_\_ SQ FT

\*\*\*If this project is 500 SQ FT or larger, grading and storm water management are required\*\*\*

### REQUIREMENTS AT TIME OF SUBMISSION

Please call license and inspection at 610-485-5719 for any questions on requirements

- Completed and signed application
- 3 sets of plans (if applicable)
- Signed contract
- Permit fee
- Contractor's Certificate of Insurance
- Any other permits pertaining to project.
  - If these permits are not submitted at the time of building permit submission, it can halt approval of permit
- If more information is required after submission, the BCO's office will let you know.

### TYPE OF IMPROVEMENT (Please Circle)

New Building/Construction Addition Accessory Structure Demolition Repair, Replacement

Other \_\_\_\_\_

### PROPOSED USE (Please Circle)

#### RESIDENTIAL

Single Family Dwelling Continuing Care Community  
 Townhouse Planned Residential Development  
 Apartment Planned Retirement Development  
 Mobile home

#### NON-RESIDENTIAL

Amusement Industrial Recreational  
 Bank Oil Tanks Towers  
 Church, Other Religious Parking Garage Stores/Mercantile  
 Educational Professional Office School, Library,  
 Hospital Public Utility Service Station

OTHER:

OTHER:

\*\*\*Call 811 or visit [www.call811.com](http://www.call811.com) BEFORE YOU DIG\*\*\*

**DESCRIPTION OF WORK: PLEASE ATTACH DRAWING OR PLAN**

**APPLICANT (Please Circle):**      *Owner*                      *Contractor*                      *Engineer*                      *Other* \_\_\_\_\_

<b>OWNER INFORMATION</b>	NAME OF AGENCY/BUSINESS (if applicable):		PHONE:
	NAME:	EMAIL:	
	ADDRESS:		
	Street	Apt#	City State Zip

<b>CONTRACTOR INFORMATION</b>	BUSINESS NAME (if applicable):	PHONE:	PA LICENSE #
	NAME:	EMAIL:	
	ADDRESS:		
	Street	Apt#	City State Zip

<b>ENGINEER or ARCHITECT INFORMATION</b>	NAME OF AGENCY/BUSINESS (if applicable):		PHONE:
	NAME:	EMAIL:	
	ADDRESS:		
	Street	Apt#	City State Zip

I HEREBY CERTIFY THAT THIS BUILDING PERMIT IS AUTHORIZED BY THE OWNER OF RECORD, THAT I HAVE BEEN AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION AS HIS/HER AUTHORIZED AGENT, AND WE AGREE TO CONFORM TO ALL APPLICABLE LOCAL, STATE, AND FEDERAL LEGISLATION.  
 Please provide signed contract between contractor and owner of property if applicant is someone other than owner.

**APPLICANT SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

<b>TOWNSHIP USE ONLY:</b> CHECK # _____ CASH AMOUNT _____	<b>TOWNSHIP USE ONLY:</b> Is this site located within an identified flood hazard area?    YES                      NO Township Flood Plain Administrator Signature: _____ Date: _____
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