Swatara Township

BUILDING CODE DEPARTMENT

599 Eisenhower Blvd. HARRISBURG, PA 17111

Phone: 717-564-2551 Fax: 717-564-5895

www.swataratwp.com

RESIDENTIAL APPLICATION FOR PLAN REVIEW AND BUILDING PERMIT

All Information Must be Completed and Printed Legibly

Site Address	Tax Parcel #						
Owner of record	Day Time Phone						
Mailing Address		City	State				
IS THE OWNER A I	AW ENFORCEMENT WORKER OR JUDGE?	□ Yes □ No					
Applicant if not owner	Phone	Email					
	Phone						
	City						
TYPE OF IMPROVEMENT Check All That Apply							
□ Plumbing* □ F	Electrical*	\Box Public Sidewalk* \Box Add	ition				
□ Foundation Only							
Other * Does NOT require a Zoning Permit							
Describe the proposed work in detail:							
ESTIMATED COST OF CONSTRUCTION \$							
Cost of construction subject to verification by the Building Official based on current ICC valuation tables.							
ESTIMATED START DATE OF PROJECT COMPLETION DATE							
LOT DIMENSIONS: (Check One) all less than 1 acre Greater than 1 acre Lot size:							
BUILDING DIMENSIONS: Stories Above Grade: Below Grade:							
Height abov	ve Grade (Measured to mean height of roof):	Width:	Length:				
BUILDING AREA: (based on actual square footage, not based on living space):							
Existing (So	g. Ft.) Proposed (Sq. Ft.)	Total (Sq. Ft.)					
FLOODPLAIN: Is th	e site located within an identified flood prone area?	(Check)	□ No				
Will any po	rtion of the flood prone area be developed? (Check)	□ No				

Note: If <u>any</u> construction or development will be within a flood prone area the proposed construction is required to be an engineered design. All plans are required to be signed and sealed by a registered design professional in PA and a flood elevation certificate must be attached.

DESCRIPTION OF BUILDING USE(S): Check one

□ Single Family □ Two-Family Dwelling

RESIDENTIAL APPLICATION FOR PLAN REVIEW AND BUILDING PERMIT CONTINUED

BUILDING DETAILS:

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PARKING: Number of off-street parts	parking spaces: -	Existing	Proposed				
HVAC: Type of Heating/Ventilating/Air Conditioning System (i.e.: electric, gas, oil, etc.)							
WATER SERVICE: (Check One)	Public	□ Private					
SEWER: (Check One)	Public D Private						
FIREPLACE(S): Number	Type of Fu	el	Type Vent				
NUMBER OF BEDROOMS: -Ex	xisting P	Proposed					
NUMBER OF BATHROOMS:-E	Existing P	Proposed	_				
DECK: DYES DNO -Ex	DECK: DYES DNO -Existing size Proposed size						
FINISHED BASEMENT: 🗖 YES	S 🗆 NO -	Existing size	Proposed size				
GARAGE: 🗆 YES 🗖 NO Atta	tached I	Detached	Basement				
BY SIGNING THIS APPLICATION I AM C APPLICABLE ADOPTED CODES AND ORI ESTIMATED VALUES SET FORTH IN THE A ARE TRUE AND CORRECT AND COMPLET Signature of Applicant	DINANCES FOR S APPLICATION HAV	WATARA TOWNSH VE BEEN EXAMINEI	HIP. I ALSO CERTIFY THA	T THE FACTS AND			
Signature of Owner	Print/Type	Name		Date			
FOR TOWNSHIP USE ONLY							
FEE AMOUNT PAID ON		CHECK #	CASH 🗆				
COMPLETED SUBMISSION DATE		_REVIEW DATE D	DUE				
WORKMANS COMP INSURANCE NOTES:	BP LIC						