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**Swatara Township**  
599 Eisenhower Boulevard  
Harrisburg, PA 17111-2397  
[www.swataratwp.com](http://www.swataratwp.com)

**Building & Codes Department**  
Office Hours: Monday – Friday 8:00 AM – 4:30 PM  
Phone: 717-564-2551 Fax: 717-564-5895  
Email: [directorofpz@swataratwp.com](mailto:directorofpz@swataratwp.com)

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All the following must be submitted at the same time in order for an application to be complete and for the Township to begin the review process:

1. **APPLICATION – one copy** of the application completed in full with the applicant and/or owner signatures.
2. **BUILDING PLAN – two copies** of plan drawings and specifications that are signed and sealed by a certified designer, engineer, or architect that meet the specifications of the PA Uniform Construction Code (UCC). **Include all specifications set forth in Township Code §295-55 (WCF) and/or §295.55.1 (Small WCF).**
3. **SITE PLAN – two copies** of the drawing or satellite image of entire property clearly indicating the proposed work location with setback distances to the lot lines, existing structures, known easements, streets and alleys, and property lines.
4. **FEE** – Permit fees must be submitted at time of application. Payment may be made by check, cash, or credit card. If paying by check, please make the check payable to “Swatara Township.” There is a 2.95% service fee for credit and debit card transactions.
  - a. Tower-Based WCF: \$2,500.00
  - b. Non-Tower WCF: \$1,000.00
  - c. Small WCF (requiring new wireless support structure): \$1,000.00
  - d. Small WCF (collocated): \$500.00 for up to five (5) Small WCFs in a single application. \$100.00 for each Small WCF thereafter in the same application.
  - e. PA UCC Fee: \$4.50
  - f. Fees are subject to change at any time by Resolution from the Board of Commissioners.
5. **ANNUAL FEES:**
  - a. Small WCF (inside right-of-way): \$270.00.
  - b. To be billed at time of permit issuance.
6. Supplemental information to be included with the application:
  - a. If the applicant is a contractor, or if a property owner is hiring a contractor, then the Township requires a **CERTIFICATE OF INSURANCE** showing proof of the current worker’s compensation insurance coverage, naming Swatara Township as the Certificate Holder, **OR** if the applicant is the property owner or is hiring a self-employed contractor with no employees, then a notarized **WORKER’S COMPENSATION AFFIDAVIT OF EXEMPTION** form is required. Notary service is available at the Township for a \$5.00 cash fee.
  - b. All contractors working in the Township must obtain a **BUSINESS PRIVILEGE LICENSE**. Please contact the Business Privilege Tax Officer for more information on use of forms and filing procedures.



Property Address: \_\_\_\_\_

Tax Parcel ID: 63-\_\_\_\_\_ - \_\_\_\_\_. Note: you can find your property's ID # here: [Dauphin County, PA Parcel Viewer](#)

<b>OWNER</b>		
_____		
Owner's Name (print)		
_____		
Address		
_____	_____	_____
City	State	Zip Code
_____	_____	_____
Email	Phone	

<b>APPLICANT</b> <input type="checkbox"/> Same as owner		
_____		
Applicant's Name (print)		
_____		
Address		
_____	_____	_____
City	State	Zip Code
_____	_____	_____
Email	Phone	

<b>CONTRACTOR</b> <input type="checkbox"/> Same as owner <input type="checkbox"/> Same as applicant		
_____		
Contractor's Name (print)		
_____		
Address		
_____	_____	_____
City	State	Zip Code
_____	_____	_____
Email	Phone	

<b>TOWNSHIP BUSINESS PRIVILEGE LICENSE</b>	
<input type="checkbox"/> Not applicable	License Number: _____

The undersigned applicant hereby applies for Building & Zoning Permits as required by Swatara Township's Code of Ordinances. The permit will be issued by the Township Zoning Officer based on the information contained in this application and supporting documents. The applicant hereby certifies that the information provided is true and correct. Any oversight or omission during the review process is not a waiver of the requirements of the Ordinances and does not relieve the applicant from compliance therewith. It is the responsibility of the property owner to establish property lines prior to construction.

**TYPE OF WCF (Check One)**

- Tower-Based WCF.
- Non-Tower WCF. Number of WCFs: \_\_\_\_\_
- Small WCF. Number of Small WCFs: \_\_\_\_\_
  - Will the Small WCFs be collocated?  Yes  No
  - Will the Small WCFs require new wireless support structure?  Yes  No
  - Will the Small WCFs be located inside of a right-of-way?  Yes  No

Describe the proposed work in detail: \_\_\_\_\_

\_\_\_\_\_

Describe the type of antenna band, etc.: \_\_\_\_\_

\_\_\_\_\_

Are there any accessory structures proposed? If so, describe in detail the proposed use of the building or structure:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant/Authorized Representative (if different than owner)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date