EAST GOSHEN TOWNSHIP

BUILDING & ZONING PERMIT APPLICATION

1580 PAOLI PIKE WEST CHESTER, PA 19380-6199

PHONE (610)-692-7171 FAX (610)-692-8950

PERMIT APPLICATION CHECKLIST

PLEASE INCLUDE ALL REQUIRED INFORMATION DESCRIBED BELOW WITH THE PERMIT APPLICATION. Incomplete Permit Applications will delay the permit review process.

1. <u>PROPERTY INFORMATION:</u>

- □ Address of property.
- **TPN** (Tax Parcel Number) and Zoning district of property (if known).
- 2. <u>OWNER INFORMATION:</u>
 - Owner Name, Address, Telephone Number and email address.

3. <u>CONTRACTOR(S) INFORMATION:</u>

<u>All</u> Contractors working at the property **SHALL** be listed on permit application.

- Business Name, Business Phone and Email address
- Contractor Type Carpentry, Electrical, Plumbing, HVAC, Roofing, etc.
- **D** Township and Pennsylvania State Contractor Registration numbers (if Applicable)

* If additional lines are needed to list all contractors, attach a separate sheet to application.

<u>All</u> contractors must furnish East Goshen Township with the following information.

- □ Contractor information form completely filled out.
- □ \$25 registration fee per contractor (if Applicable).
- □ Copy of insurance certificate(s) naming East Goshen Township as a certificate holder. (General Liability and Workman's Comp [if applicable])

4. **PROJECT INFORMATION:**

- Project Type Residential, Commercial, New Construction, Addition, Renovation, Pool, Shed, Deck, Patio, Siding, Roofing, HVAC, Finished Basement, etc.
- **D** Total Cost of Project Includes all phases of construction, material and labor costs.
- □ Total Square Footage Total area of project.
- □ Historic Resource Is the structure or property classified as a Historic resource?
- Does the property have any easements? Show easements on site plan for the project
- □ Is the structure located within the floodplain? This information is available at the Township.
- Project Description Use this area to describe in more detail the work proposed.
- D Pennsylvania Residential Energy provisions worksheet (for all new conditioned spaces)
- □ Area of New Impervious Coverage If the project increases the impervious cover on the property indicate the area of the new impervious coverage, submit a site plan and <u>COMPLETE A STORMWATER MANAGEMENT APPLICATION.</u>

5. <u>CERTIFICATION</u>

- □ The applicant shall certify that the information is true and correct
- 6. <u>SITE PLAN</u>
 - Submit a site plan of the property showing all current structures and the proposed work with dimensions and property lines.

RESIDENTIAL CONSTRUCTION

<u>All</u> residential building permit applications require **TWO (2) COMPLETE AND DETAILED COPIES OF THE PROPOSED BUILDING PLANS AND SITE PLANS,** including all specs, materials required, sizes, etc. HVAC units require product specification information. A marked up set of plans will be returned to the applicant upon approval.

If the project increases the building(s) footprint, adds a new structure or requires a stormwater management application, please provide a site plan showing all proposed improvements and the distances to all property lines; in some cases a property boundary survey may be required.

COMMERCIAL CONSTRUCTION

<u>All</u> commercial building permit projects require **THREE (3) SEALED SETS OF BUILDING PLANS,** including all specs, materials required, sizes, etc. HVAC units require product specification information. A marked up set of plans will be returned to the applicant upon approval.

Commercial projects that include electrical work must have the electrical plans reviewed and approved by a licensed third party electrical inspector and submitted with your permit application (3 Sets).

If the project increases the building(s) footprint or adds a new structure, please provide a drawing of the lot showing the proposed structure and the distances to all property lines.

*** APPLICATION MUST BE SIGNED BY THE APPLICANT ***

Permit fees are calculated during the review process, you will be notified of the permit fee when your permit is ready. Fees are due when the permit is issued and must be paid by check only. **NO CASH or CREDIT CARDS ACCEPTED.**

ALL PERMITS REQUIRE INSPECTIONS. ALL INSPECTIONS SHALL BE SCHEDULED 24 HOURS IN ADVANCE. FINAL INSPECTION AND ISSUANCE OF A USE & OCCUPANCY CERTIFICATE IS REQUIRED PRIOR TO ANY USE.

F:\Data\Shared Data\Code Dept\Application & Forms\Current Forms and Applications\BuildingZoningPermitApp 02102016.doc

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(PLEASE PRINT CLEARLY)

Date Submitted:		Date Received: Zoning District: TPN:		
1. PROPERTY INFORMATION Property Address:				
2. OWNER INFORMATION Owner:	Address: _		City:	
State: Zip:	Home Phone: _	Mobile Pl	hone #:	
Email:				
3. Contractor Information NAME PHONE/EMA	AIL	CONTRACTOR TYPE	TWP REG. # / PA REG. #	
 4. PROJECT INFORMATION Project Type: Is the property an Historic Resource? Is the structure located within the floc create new impervious cover on the 	?: Does the F podplain (SFHA – S	Property have any easements?: pecial Flood Hazard Area)?:	(Show on Site Plan) Does the project	
IF THE PROJECT INCREASES THE IM PERMIT	PERVIOUS COVER APPLICATION AND DITIONS, NEW STO	ON THE PROPERTY; <u>COMPLETE</u> D SUBMIT IT WITH THIS APPLIC ONE OR PAVED DRIVEWAYS, ET	A STORMWATER MANAGEMENT ATION.	
 (IF THE PROJECT ADDS A STRUCTUR IMPERVIOUS COVERAGE ON THE 5. CERTIFICATION I hereby certify that the proposed we owner to make this application as th jurisdiction. Construction shall comp Building/structure shall also comply has been examined by me and to my 	PROPERTY; <u>A SITE</u> ork is authorized by e authorized agent oly with all applicat with the American	PLAN MUST BE SUBMITTED W y the owner of record and that t and we agree to conform to al ole Township Codes and the Add 's with Disabilities Act of 1990 v	ITH THE PERMIT APPLICATION.) I have been authorized by the I applicable laws of this opted ICC Building Codes. The where applicable. This application	

NAME (PRINTED):	SIGNATURE:	DATE:	
PROJECT CONTACT (NAME):		CELL PHONE #:	

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6. SITE PLAN: Show existing features of the property, property lines, easements and project dimensions.

