

PENN TOWNSHIP PLANNING & ZONING

2001 MUNICIPAL COURT
HARRISON CITY, PENNSYLVANIA 15636-1349
OFFICE 724.744.2171 FAX 724.744.7579

Dear Applicant:

Attached please find the following items:

- 1. Building Permit Application** – This is the application form that must be used. All items must be completed on this application form. Incomplete applications will not be accepted. If there are any items that are not applicable to your specific project please indicate this on the form.
- 2. Inspection Request** – This form is to be returned to us a minimum of 24 hours in advance of a requested inspection. It may be returned to this office in person, email or regular mail. **This form is the only means of scheduling any inspection.**
- 3. Grading Permit Application** – This form is to be utilized for stand-alone new construction not located in an approved and permitted development plan. A designed Erosion & Sedimentation Plan is required as part of this submission

IMPORTANT: Do not use any old applications that you may have downloaded or received. Only use this version of the Township's building permit form.

Should you have any questions or require additional information please contact the Community Development Department at (724) 744-2171.

Thank you,

The Community Development Department
Township of Penn

PROJECT DESCRIPTION

RESIDENTIAL

- 01 HOUSE
- 02 ADDITION
- 03 REMODELING
- 04 GARAGE
- 05 PORCH, PATIO, DECK
- 06 SWIMMING POOL
- 07 SHED OR STORAGE

COMMERICAL (BUSINESS)

- 10 BUILDING
- 11 ADDITION
- 12 REMODLING

(INDUSTRIAL)

- 20 BUILDING
- 21 ADDITION
- 22 REMODELING

OTHER

- 60 CELL TOWER
- 60 TANK
- 60 MISC. (DESCRIBE) _____
- 60 EXEMPT BUILDING _____
- 70 DEMOLITION

COST OF IMPROVEMENT _____

BUILDING MEASUREMENTS

Length _____
 Width _____
 Height _____

SQUARE FOOTAGE OF PROPOSED STRUCTURE

BASEMENT _____
 1ST FLOOR _____
 2ND FLOOR _____
 DECK _____
 GARAGE _____
 OTHER ENCLOSED AREAS _____

TOTAL _____

IN ADDITION TO THIS APPLICATION THE FOLLOWING IS REQUIRED

- _____ PLOT PLAN (must match building plans for proposed structure)
- _____ Two complete sets of building plans
- _____ Copy of Deed for property
- _____ Copy of Workers Compensation Insurance (If applicable)
- _____ Completed excavation permit application (If applicable)
- _____ Impact fee calculation and participation agreement (If applicable)
- _____ PA ONE CALL serial # _____
(1-800-242-1776)

Building permit fee is to be paid when permit is issued

Applications that are incomplete or that do not contain all the requested information will be rejected until the requested information or documentation is received. All building permits require a FIFTEEN DAY (15) review time from the date that the application is complete.

Please note!

*Construction hours in Penn Township are from 7:00 AM to 9:00 PM.
 The burning of construction materials is prohibited in Penn Township.*

Signature of Person Completing This Form _____

DATE _____ / _____ / _____

PENN TOWNSHIP INSPECTION REQUEST

When scheduling any inspections we require completion and submission of this form to our offices a minimum of 24 hours in advance. Inspections will **NOT** be scheduled in any other manner. Send to: communitydevelopment@penntwp.org

Permit Holders Name: _____ Phone #: _____
Email: _____
Contractors Name: _____ Phone #: _____
Email: _____
Building Permit #: _____ Issue Date: _____
Subdivision: _____ Lot #: _____
Street Address: _____
City: _____ Zip Code: _____

The Following Inspection is Requested:

- Footer Date: _____ Time: _____
- Foundation Date: _____ Time: _____
- Framing Date: _____ Time: _____
- Mechanical Date: _____ Time: _____
- Insulation Date: _____ Time: _____
- Drywall/Wallboard Date: _____ Time: _____

<input type="radio"/> Final Inspection is Requested to be Conducted on: Date _____ Time: _____ Name to Appear on Occupancy Certificate: _____ <p style="text-align: center;">(Certification of Final Electrical Inspection is Required Prior to Final Site Visit)</p>

Proof of Final Sewage Inspection is Required Prior to Final Inspection Approval
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Office Use		
Sewage Final Inspector: _____	Pass: _____	Fail: _____
Building Final Inspector: _____	Pass: _____	Fail: _____
*Occupancy Certificate will only be issued if all inspections have been successfully completed		
*A \$50.00 fee will be assessed for any required re-inspection following a failed inspection		

**PENN TOWNSHIP (724) 744-2171
MINOR EXCAVATION PERMIT
APPLICATION
25 CUBIC YARDS TO 16,000 CUBIC YARDS**

APPLICANT:

Name _____

Address _____

City _____ State _____ Zip _____

Phone () _____ Cell Phone () _____ Fax () _____

OWNER: (If same as Applicant check)

Name _____

Address _____

City _____ State _____ Zip _____

Phone () _____ Cell Phone () _____ Fax () _____

CONTRACTOR: (If same as Applicant check)

Name _____

Address _____

City _____ State _____ Zip _____

Phone () _____ Cell Phone () _____ Fax () _____

PROPERTY LOCATED AT:

Description of Excavation: _____

Start Date _____

APPLICATION MUST INCLUDE SITE PLAN SHOWING SOIL AND EROSION CONTROLS