

BUILDING PERMIT (UCC EXEMPT)
WARRINGTON TOWNSHIP BUILDING PERMIT APPLICATION AND PERMIT
 (to obtain Occupancy Certificate)
 3345 Rosstown Road, Wellsville, PA 17365

| | | |
|------------------------------------|-----------------------|--------------------------|
| Building Permit # _____ \$ _____ | Map Parcel # _____ | *OFFICE USE ONLY* |
| Demolition Permit # _____ \$ _____ | Zoning Permit # _____ | |
| State Training Fee \$ 2.00 | C/O # _____ | |
| Total Due \$ _____ | | |

Application is hereby made for a building permit in accordance with the requirements of the building Ordinances and amendments. Please complete the following sections that apply to your project.

Date of Application _____
Expiration Date _____

A. Application Information
 Property Owner _____ Address _____
 Phone (H) _____ (W) _____

Applicant _____ Phone _____
 Development Name _____ Phase _____ Lot No. _____
 LIV. SPACE _____ ATT. GAR _____ UNFIN. BSMT _____ ACC. BLD. _____
 Zoning District _____ Total Sq.Ft. _____

Of Projects Including All Areas
Use Group Class. _____

Construction Location _____

Contractor _____ Address _____
 Phone # _____ Worker's comp. Certificate No. _____

B. LOT INFORMATION
 Width _____ Length _____ Total Area in Square Feet _____

C. LOT SETBACKS
 Front _____ Rear _____ One Side _____ Other Side _____

D. TYPE OF OCCUPANCY
 Residential _____ Commercial _____ Industrial _____ Multi-unit _____ Other _____

E. TYPE OF CONSTRUCTION
 Single Family Dwelling _____ Duplex _____ Townhouse _____ Multi-family _____ Addition _____
 Garage: Detached _____ Attached _____ Accessory Structure _____ Pool: Ingrd. _____ Abovegrd. _____

Building is to be _____ ft. wide by _____ ft. long by _____ ft. in height

Variance Granted? _____ Yes _____ No Date: _____

Sewage On Lot Septic Permit # _____ Public Sewer Permit # _____

Estimated Cost of Construction: _____ Cost by Resolution: _____

F. OTHER
 All plans and specifications attached _____ No. of parking spaces (commercial/business) _____

Signature of Applicant: _____ **Date:** _____

Issued By: _____ **Date:** _____