

BUILDING / ZONING PERMIT APPLICATION

UCC PERMIT # _____
 ZONING PERMIT# _____
 CMI # _____
 ISSUE DATE _____

LOWER MOUNT BETHEL TOWNSHIP
 2004 HUTCHINSON AVENUE
 MARTINS CREEK, PA 18063
Phone: 610-252-5074
Email: zoning@lowermtbethel.org

PLEASE PRINT LEGIBLY AND FILL OUT FORM

DATE RECEIVED: ____/____/____

PROPERTY INFORMATION

ST NUMBER: _____ STREET: _____ SUITE/APT: _____ ZONING DIST: _____
 TAX ID: _____ PIN: _____ LOT SIZE: _____ SQ. FT.: _____
 FACILITY NAME: _____ SUBDIVISION: _____ LOT: _____

APPLICANT INFORMATION

APPLICANT IS: OWNER CONTRACTOR DESIGN PROFESSIONAL OTHER _____
 NAME: _____ PHONE: _____ CELL: _____
 ADDRESS: _____ FAX: _____ EMAIL: _____
 CITY: _____ STATE: _____ ZIP: _____
 SIGNATURE: _____

An application is hereby made for a permit for construction as indicated herein and which shall be located as shown on the plot plan submitted herewith and/or to use the premises for the purpose herein described. Applicant agrees that such work will comply with all provisions of the Zoning Ordinance, Building Code, with all deed restrictions and with all other applicable Ordinances of Lower Mt. Bethel Township.

OWNER INFORMATION CHECK HERE IF SAME AS APPLICANT

NAME: _____ PHONE: _____ CELL: _____
 ADDRESS: _____ FAX: _____ EMAIL: _____
 CITY: _____ STATE: _____ ZIP: _____
 SIGNATURE: ** _____ **REQUIRED ON ALL APPLICATIONS

CONTRACTOR INFORMATION CHECK HERE IF SAME AS APPLICANT

NAME: _____ PHONE: _____ CELL: _____
 ADDRESS: _____ FAX: _____ EMAIL: _____
 CITY: _____ STATE: _____ ZIP: _____
 SIGNATURE: _____

DETAILED DESCRIPTION OF PROJECT: _____

COST INCLUDING LABOR AND MATERIALS: \$ _____

INT. FLOOR SPACE _____ SQ.FT. # OF BEDROOMS _____ # OF STORIES _____ HEIGHT _____ FT.

PROPOSED GROSS AREA TO BE CONSTRUCTED (INCLUDE BASEMENT, GARAGE, PORCH/DECK, ALL FLOORS): _____ SQ. FT.

APPLICATION FOR: (CHECK ALL THAT APPLY)		PROPOSED USE:	
<input type="checkbox"/> NEW BUILDING <input type="checkbox"/> ALTERATION <input type="checkbox"/> INTERIOR ALTERATION <input type="checkbox"/> HOME OCCUPATION <input type="checkbox"/> RAZING <input type="checkbox"/> TENNANT FIT OUT <input type="checkbox"/> DRIVEWAY	<input type="checkbox"/> ADDITION TO BUILDING <input type="checkbox"/> ACCESSORY BUILDING <input type="checkbox"/> TEMPORARY BUILDING <input type="checkbox"/> CHANGE OF USE <input type="checkbox"/> PARKING LOT <input type="checkbox"/> FLOOD PLAIN PERMIT <input type="checkbox"/> ROAD OPENING (HOP) <input type="checkbox"/> OTHER (SEE DESC.)	<input type="checkbox"/> ONE FAMILY DWELLING <input type="checkbox"/> TWO FAMILY DWELLING <input type="checkbox"/> TOWNHOUSE <input type="checkbox"/> APARTMENT BLDG. <input type="checkbox"/> STORAGE <input type="checkbox"/> ACCESSORY	<input type="checkbox"/> PLACE OF ASSEMBLY <input type="checkbox"/> BUSINESS (OFFICE). <input type="checkbox"/> EDUCATIONAL <input type="checkbox"/> INDUSTRIAL. <input type="checkbox"/> MERCANTILE (STORE) <input type="checkbox"/> OTHER SEE DESC
<input type="checkbox"/> INGROUND POOL <input type="checkbox"/> ABOVEGROUND POOL	SEE REVERSE SIDE FOR ADDITIONAL INFORMATION		

(OVER)

MISCELLANEOUS INFORMATION			
<input type="checkbox"/> IN FLOOD PLAIN <input type="checkbox"/> PUBLIC WATER <input type="checkbox"/> PRIVATE WELL	<input type="checkbox"/> PUBLIC SEWER <input type="checkbox"/> PRIVATE SEPTIC <input type="checkbox"/> INDUSTRIALIZED	<input type="checkbox"/> MANUFACTURED <input type="checkbox"/> BASEMENT <input type="checkbox"/> ATTACHED GARAGE	<input type="checkbox"/> DETACHED GARAGE <input type="checkbox"/> OTHER _____
CONSTRUCTION TYPE:		HEATING FUEL:	
<input type="checkbox"/> WOOD <input type="checkbox"/> MASONRY <input type="checkbox"/> _____	<input type="checkbox"/> STRUCTURAL STEEL <input type="checkbox"/> REINFORCED CONCRETE	<input type="checkbox"/> GAS <input type="checkbox"/> OIL <input type="checkbox"/> ELECTRICITY	
SWIMMING POOL DETAILS			
<input type="checkbox"/> FENCE HEIGHT _____ <input type="checkbox"/> LADDER	<input type="checkbox"/> GATE HEIGHT _____ <input type="checkbox"/> DECK LENGTH _____ WIDTH _____		
POOL SIZE _____ FT. X _____ FT. OR DIAMETER _____ FT. = _____ SQ.FT.			

OFFICE USE ONLY

	DEPARTMENT	APPROVED BY	N/A	DENIAL	DATE	PERMIT FEES:		MISC.	
<input type="checkbox"/>	PLANNING		<input type="checkbox"/>			ZONING	\$.	<input type="checkbox"/>	CONTR. LICENSE
<input type="checkbox"/>	ZONING		<input type="checkbox"/>			BUILDING (UCC)	\$.	<input type="checkbox"/>	WORKER'S COMP
<input type="checkbox"/>	CMI		<input type="checkbox"/>			OCCUPANCY	\$.	<input type="checkbox"/>	NOTARIZED FORM
<input type="checkbox"/>	T&M ENG		<input type="checkbox"/>			PA ACT 157	\$.		
						ADMIN	\$.		
						DEPOSIT	\$.		
						BAL DUE	\$.		

PERMIT ISSUED BY: _____ DATE: _____

PERMIT DENIED BY: _____ DATE: _____

DENIAL REASON: _____

NOTE: PAYMENT OF FEE DOES NOT GUARENTEE APPROVAL
FEES ARE NON-REFUNDABLE