



Mechanical Application

Parcel # _____

Property Owner _____ Phone No. _____

Address _____ E-Mail: _____

Property Location _____

Subdivision/Development _____ PA # _____

Mechanical Contractor _____ Phone No. _____

Address _____ E-Mail: _____

NEW _____ ALTERATION _____ ADDITION _____ REPAIR _____

Use of Property: Residential _____ Commercial _____ Industrial _____

<u>TYPE OF EQUIPMENT</u>	<u>NUMBER</u>
Air Cond. Units H.P. ea	_____
Refrigeration Units H.P. ea	_____
Boilers H.P. ea	_____
Forced Air Systems	_____
Gravity Systems	_____
Floor Furnaces	_____
Wall Heaters	_____
Unit Heaters	_____
Conversion Burner	_____
Clothes Dryers	_____
Ventilation Fan	_____
Range Hood	_____
Air Handling cfm	_____
Incinerator	_____
Gas Piping	_____
Range Com ___ Res ___	_____
Fire Suppression System	_____
NFIPA13 ___ NFIPA13R ___	_____
NFIPA13D ___	_____

Note: This permit is issued contingent upon all work being in compliance with the PA State Uniform Bldg. Code including all supplements and other applicable Township regulations.

Job Description: _____

Cost of Improvement

Application Date

Signature of Applicant



RESIDENTIAL DECK & PATIO APPLICATION

Property Owner _____ Phone # _____

Address _____ E-Mail _____

Property Location _____ PA License # _____

Phone # _____

Contractor _____ E-Mail _____

Address _____

1. Size: Max Length _____ Max Width _____ Max Height _____
Total square feet of deck/patio floor _____ (what is the greatest height from floor of deck to ground surface)
2. Footing: Depth below grade (36" min.) _____ Diameter/Width (12" min.) _____
3. Support Post: Size _____ Spacing _____ Main Beam: Size _____
4. Guard Rail: Height from floor (36" min.) _____ Spacing between pickets _____ (4" max.)
5. Floor Joist: Size _____ Spacing _____ Max. Span _____
6. Stairway Specifications: Depth of Tread _____ Height of Riser _____
7. Stairway Handrail Specifications: (Stairway handrails must provide graspability)
 - a. Circular handrails: Outside Diameter _____ (1 1/4" min. - 2" max.)
 - b. Non-circular handrails: Max Cross-section Dimension _____ (2 - 1/4" max.)
(Handrails with a perimeter greater than 6- 1/4" shall provide graspable finger recess area on both sides of the profile.)
8. Submit a detail showing the type and location of the Lateral Support Brackets
9. Submit a detail showing how the deck joist is connected to the main beam and the main beam to the support posts
10. Band joist and deck ledger size, material, type connector, and spacing (ledger locks must be installed to manufacturer specifications)
11. Location on Lot: Using the graph on page two of this application, draw a plot plan showing the boundary of the property and the location of all required features and structures listed
12. Is there a hot tub? No _____ Yes _____ details below
 - a. Does the hot tub have a safety cover that complies with ASTM F 1346 No _____ Yes _____
13. A complete set of **detailed plans** must be submitted with this application

Cost of Improvement

Application Date

Signature of Applicant

Note: Any applicant that is unable to provide the required detailed information and plans as stated above should contact an architect or other design professional for assistance.



RESIDENTIAL UTILITY BUILDING ZONING PERMIT
Less than 200 Square Feet

Property Owner _____ Phone # _____

Address _____ E-Mail _____

Property Location _____

Contractor _____ E-Mail _____

Address _____ Phone # _____

1. Size: Length _____ Width _____ Height _____ from finished grade to highest point of structure

2. Type: Premanufactured _____ Built-on-Site _____

3. Foundation: Stone _____ Concrete Pad _____ Other (explain) _____

4. Location on Lot: Draw a plot plan showing boundary of property and location of improvements: 1) all existing buildings 2) well; septic system; tank; drainfield 3) streets (public/private) 4) location of the new utility building showing the distance from all property Lines

5. Will electric service be installed? (If yes give details) Yes _____ No _____

A) Type of wire _____

B) Depth of wire _____

C) Size and length of wire _____

D) Circuit protector: 15 AMP _____ 20 AMP _____ 30 AMP _____

E) Number of outlets/switches _____

F) Contractor's name _____ Phone # _____

G) Cost: _____

6. Will water supply pipe be installed? Yes _____ (Plumbing Application Required) No _____

Application Date

Signature of Applicant