

BUILDING PERMIT APPLICATION FORM
FRANKLIN TOWNSHIP, YORK COUNTY, PENNSYLVANIA
150 CENTURY LANE, DILLSBURG, PA 17019

Note: A building permit becomes invalid unless the authorized construction begins within 180 days after the permit's issuance or if the authorized construction work permit is suspended or abandoned for 180 days after work has commenced.

A plan of the site showing the exact location, dimensions and height of the proposed construction, as well as any existing buildings or structures, must accompany this application. Include parking and loading space information, if applicable.

IDENTIFICATION	NAME	STREET ADDRESS	CITY	ST	ZIP	PHONE
OWNER						
CONTRACTOR / HIC No.						
ARCHITECT / ENGINEER NAME						

SITE ADDRESS

SITE LOCATION	LOT NO.
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SUBDIVISION NAME

1) Is site located in a flood prone area?	YES	NO
2) Does building location and lot size meet requirements of Zoning ordinance?	YES	NO

3) MAP:	PARCEL:	PROPERTY ID:
TYPE OF IMPROVEMENT	TYPE OF USE	
Building area sq. ft. _____ Living area sq. ft. _____ Garage area sq. ft. _____ 4) New building 5) Addition - number of dwelling units _____ 6) Alteration - number of dwelling units added _____ removed _____ 7) Repair, replacement 8) Wrecking (demolish) - number of dwelling units removed _____ Building area sq. ft. _____ 9) Remodeling 10) Other - describe proposed work _____	RESIDENTIAL	NON-RESIDENTIAL
	15) One family 16) Two family 17) Three family 18) Four or more family - number of units _____ 19) Transient hotel or motel - number of units _____ 20) Accessory Garage _____ Carport _____ Shed 21) Swimming pool 22) Other - describe: _____ _____ _____	23) Amusement, recreation, place of assembly 24) Church, other religious building 25) Industrial, storage building 26) Parking garage 27) Accessory Garage _____ Carport _____ Shed 28) Service station, repair garage 29) Hospital, institution, nursing home 30) Office, bank, professional 31) Public works, utility building 32) School, college, other educational 33) Store, other mercantile, restaurant 34) Swimming pool 35) Tank, tower, sign 36) Other - describe: _____

OWNERSHIP

11) Private 12) Public (federal, state, local) 13) Other _____ 14) Cost \$ _____ Actual or Estimated

TYPE OF SEWAGE DISPOSAL	TYPE OF WATER SUPPLY	TYPE OF ROAD	
37) Public sewer	40) Public	43) Paved	45) Local Road
38) Private system (septic tank, etc.)	41) Private (well, cistern)	44) Not paved	46) State Road
39) None required	42) None required		47) Private Road

The applicant or authorized individual of the property owner of record hereby agrees to comply with all the laws of the municipality and the ordinances of this jurisdiction pertaining to building, and to construct the proposed building or structure or make the proposed change or alteration in accordance with the plans and specifications submitted herewith, and to certify that the information and statements given on this application, drawings and specifications are to the best of his/her knowledge, true and correct. In addition, if a permit for the work described in this application is issued, certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit during normal business hours to enforce the provisions of the **Pennsylvania Uniform Construction Code Act, #245 of 199 and any appendix amendments**. I further certify that I am the owner of record of the named property, or that proposed work is authorized by the owner of record and that I have been authorized by the owner to make application as their authorized agent. In addition, if a permit for the work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit during normal business hours to enforce the provisions of the Pennsylvania Uniform Construction Code.

Date _____ Application by _____ Address _____

TRADE INSPECTION REQUIRED	FOR OFFICE USE ONLY
Zoning – Pre-site Visit YES / NO Explain: _____ Building: YES / NO Structural type: _____ No. of rooms _____ Electrical: YES / NO Service Size: _____ Plumbing: YES / NO No. of bathrooms: _____ Mechanical: YES / NO Type of heating: _____ Other: YES / NO Explain: _____	Date permit issued _____ Permit no. _____ Permit fee \$ _____ Permit issued by _____ Date of on-site inspection _____ Sewage permit no. _____ Driveway permit no. _____ Township _____ State _____ SWM Permit no. _____ Issue date: _____ Occupancy Permit no. _____ Issue date: _____ FINAL ZONING INSPECTION: Start date: _____ Completion date: _____ Return pink copy to issuing officer within sixty (60) days after completion of work. Zoning Officer Signature: _____