


# Application for Commercial Building Permit and Plans Examination

<b>CODE ADMINISTRATORS, INC.</b> 1525 Oregon Pike, Suite 901 Lancaster, PA 17601 Ph: (717) 859-3350 Fx: (717) 859-3363		<b>BOROUGH OF LITITZ</b> 7 S Broad Street Lititz, PA 17543 Ph: (717) 626-2044 Fx: (717) 626-1329
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PERMIT NUMBER: \_\_\_\_\_ ACCOUNT NUMBER: 370-\_\_\_\_\_

<b>LOCATION OF PROJECT</b>	Address _____ Intended Use _____
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<b>OWNER OF RECORD</b>	Name of Owner _____ Address of Owner _____ City _____ Phone Number of Owner _____ Email of Owner _____
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<b>PROJECT INFO</b>	<input type="checkbox"/> New Building <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Demolition <input type="checkbox"/> Relocation <input type="checkbox"/> Fire Prevention <input type="checkbox"/> Change of Use <input type="checkbox"/> Plumbing <input type="checkbox"/> Mechanical <input type="checkbox"/> Electrical Brief Description of Project _____ _____ Cost of Construction _____ Sq. Footage _____
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The applicant certifies that all information on this application is correct and the work will be completed in accordance with the “approved” construction documents and PA Act 45 (Uniform Construction Code) and any additional approved building code requirements adopted by the Municipality. The property owner and applicant assumes the responsibility of locating all property lines, setback lines, easements, rights-of-way, flood areas, etc. Issuance of a permit and approval of construction documents shall not be construed as authority to violate, cancel or set aside any provisions of the codes or ordinances of the Municipality or any other governing body. The applicant certifies he/she understands all the applicable codes, ordinances and regulations.

Applicant for a permit shall be made by the owner or lessee of the building or structure, or agent of either, or by the registered design professional employed in connection with the proposed work.

**I certify that the code administrator or the code administrator’s authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.**

<b>SIGNATURE REQUIRED</b>	Applicant Printed Name _____ Applicant Signature _____ Date _____
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Please note that the following are required to be submitted with this application:

Two (2) Sets of Site Plans

Two (2) Complete Sets of Construction Drawings

When Possible an Additional Digital Submission of Construction Documents is Requested



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## Contractor Information

General Contractor

General Contractor _____
Address _____
Phone _____ Fax _____ Mobile _____
Email _____

Demolition Contractor

Framing Contractor _____ Contract # _____
Scope of Work _____
_____
Asbestos Notification submitted by _____ Date _____

Framing Contractor

Framing Contractor _____ Contract # _____
Scope of Work _____
_____

Electrical Contractor

Electrical Contractor _____ Contract # _____
Scope of Work _____
_____
_____

Plumbing Contractor

Plumbing Contractor _____ Contract # _____
Scope of Work _____
_____
_____

Heating Contractor

Heating Contractor _____ Contract # _____
Scope of Work _____
_____
_____

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Foundation  
Contractor

Foundation Contractor _____ Contract # _____
Scope of Work/Type of Work _____
_____
_____

Fire Prevention  
Contractor

Fire Prevention Contractor _____ Contract # _____
Scope of Work/ _____
_____
_____

Provide copies of all other applicable permits, certifications or licensing requirements, which may apply under the following:

1. Elevator or Lifting Device Regulations
2. Boiler and Unfired Pressure Vessel Law
3. Propane and Liquefied Petroleum Gas Act
4. Health Care Facilities Act
5. Older Adult Daily Living Centers Licensing Act

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Permit # \_\_\_\_\_

**Site or Plot Plan** (show all property lines, structures and driveway accesses)

**Plan scale** \_\_\_\_\_

