


Application for Residential Building Permit and Plans Examination

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

LOCATION OF PROJECT	Address _____ Intended Use _____
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OWNER OF RECORD	Name of Owner _____ Address of Owner _____ City _____ Phone Number of Owner _____
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PROJECT INFO	<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"/> Foundation Only <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, PA Act 45 (Uniform Construction Code), any additional approved building code requirements adopted by the Municipality and the Borough's Stormwater Management Ordinance, Section 303. 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.

SIGNATURE REQUIRED	Applicant Printed Name _____ Applicant Signature _____ Date _____
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FOR OFFICIAL USE BELOW THIS LINE

Permit Number _____	Zoning Fee: _____ x \$ _____ = _____
Construction Plans Submitted _____	Review Fee: _____ x \$ _____ = _____
Date Issued _____	Inspections: _____ x \$ _____ = _____
Permit Type _____	Education/Program Training Fee = <u>4.00</u>
Use Group _____	TOTAL FEE TO BE COLLECTED
Code Administrator _____	

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Permit # _____

Zoning Review

Zoning Permit # _____ Approval Date _____

Lot Detail

Account # _____	Zoning District _____
Front Yard _____	Use _____
Side Yard _____	Rear Yard _____
ZHB Action/Decision _____	Date _____
Floodplain Located Within Site _____	Yes _____ No _____ Study Done
Historic Structure _____	Yes _____ No _____

**Notes/
Conditions**

Hwy. Occupancy Permit # _____ Issued _____ Twp. _____ DOT _____

Public Sewer Permit # _____ Issued _____

On-site Sewage Permit # _____ Issued _____

Zoning Officer Signature _____

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Permit # _____

Contractor Information

General Contractor

General Contractor _____
Address _____
Phone _____ Fax _____ Cell _____
Pennsylvania Home Improvement Contractor Registration # _____

Framing Contractor

Framing Contractor _____
Scope of Work _____
Address _____
Phone _____ Fax _____ Cell _____
Pennsylvania Home Improvement Contractor Registration # _____

Electrical Contractor

Electrical Contractor _____
Scope of Work _____
Address _____
Phone _____ Fax _____ Cell _____
Pennsylvania Home Improvement Contractor Registration # _____

Plumbing Contractor

Plumbing Contractor _____
Scope of Work _____
Address _____
Phone _____ Fax _____ Cell _____
Pennsylvania Home Improvement Contractor Registration # _____

Heating Contractor

Heating Contractor _____
Scope of Work _____
Address _____
Phone _____ Fax _____ Cell _____
Pennsylvania Home Improvement Contractor Registration # _____

Foundation Contractor

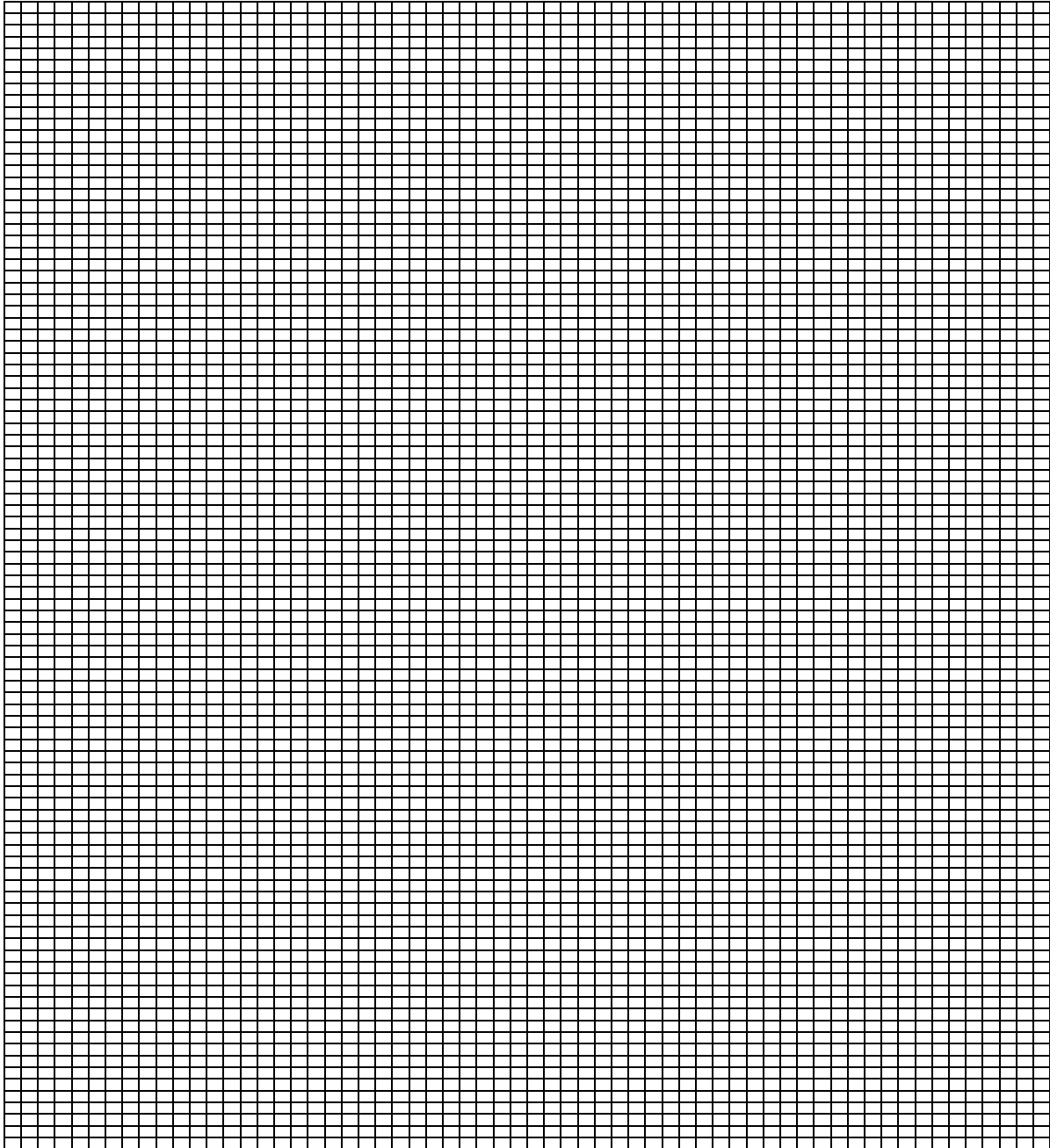
Foundation Contractor _____
Scope of Work _____
Address _____
Phone _____ Fax _____ Cell _____
Pennsylvania Home Improvement Contractor Registration # _____

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Permit # _____

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

Plan scale _____



901 (B) ELECTRICAL EXEMPTION AFFIDAVIT

Applicant _____

Address _____

Religious Sect _____

I, _____ do hereby affirm that I am a member of the _____ religious sect which has established tenets or teachings which conflict with the electrical provision of the Uniform Construction Code and that as a member of the _____ sect I adhere to the established tenets or teachings. I further affirm that the residential structure on the above mentioned property will be used solely as a residence for myself and my household. I understand that in receiving an exemption for a dwelling unit under Section 901 (B) of the Act and subsequently sell or lease the dwelling unit, that I shall bring the dwelling unit into compliance with the provision of the Uniform Construction Code for which an exemption is granted.

Signature of Applicant _____

Subscribed and sworn to before me this _____ day of _____, 20_____.

Signature of Notary _____

(Notary Seal)

Code Administrator Approval:

Date _____ Signed _____