



TOWNSHIP OF WARMINSTER

Department of Licenses & Inspections

910 W. Bristol Road • Warminster, Pennsylvania 18974 • (215) 443-5423 • Fax: (215) 443-7911

CONSTRUCTION PERMIT APPLICATION

APPLICATION DATE _____ APPROVAL DATE _____ PERMIT NUMBER _____

LOCATION OF PROPOSED WORK OR IMPROVEMENT

Site Address: _____ Tax Parcel #: _____
 Lot #: _____ Subdivision/Land Development: _____ Phase: _____ Section: _____

TYPE OF WORK OR IMPROVEMENT *(Check One)*

- New Building Addition Alteration Repair Demolition Relocation
 Foundation Only Change of Use Plumbing Mechanical Electrical Other

Describe the proposed work: _____

TOTAL ESTIMATED COST OF CONSTRUCTION (Contract or construction value) \$ _____

OWNER: _____
 Mailing Address: _____
 Phone #: _____ Fax #: _____

CONTRACTOR INFORMATION

	Name	Address	Phone #
Applicant (not owner)			
Design Professional			
Principal Contractor			
Excavation			
Masonry			
Concrete			
Carpentry			
Plumbing			
Sewer			
Electrical			
Mechanical			
Roofing			
Drywall or Lathing			
Paving			
Fire Alarm			
Sprinkler			

DESCRIPTION OF BUILDING USE

RESIDENTIAL
 1-Family Dwelling (R-3)
 2-Family Dwelling (R-3)

NON-RESIDENTIAL
 Specific Use: _____
 Use Group: _____
 Change in Use: YES NO
 If YES, Indicate Former: _____
 Maximum Occupancy Load: _____
 Maximum Live Load: _____

BUILDING SECTION: ESTIMATED COST OF CONSTRUCTION (Building construction value) \$ _____

Number of Residential Dwelling Units: _____ Existing _____ Proposed _____

Construction Type _____ GROSS FLOOR AREA _____

Does or will your building contain any of the following:

Fireplace(s): Number _____ Type of Fuel _____ Type of Vent _____
 Elevator/Escalators/Lifts/Moving walks: YES NO
 Sprinkler System: YES NO
 Pressure Vessels: YES NO
 Refrigeration Systems: YES NO

Bedrooms (number)		Stories (number)		Street Frontage (feet)	
Full Baths (number)		Building Area (sq/ft)		Front Setback (feet)	
Partial Baths (number)		Living Area (sq/ft)		Rear Setback (feet)	
Garages (number)		Basement Area (sq/ft)		Left Setback (feet)	
Garage Area (sq/ft)		Office/Sales (sq/ft)		Right Setback (feet)	
Outside Parking (number)		Service (sq/ft)		Height Above Grade (feet)	

PLUMBING SECTION: ESTIMATED COST OF CONSTRUCTION (Plumbing construction value) \$ _____

Enter the number and size of Fixtures being Repaired, Replaced or Installed

Tubs / Showers		Laundry Tubs		Sewage Ejectors	
Shower stalls		Dishwashers		Back Flow Preventers	
Lavatories		Garbage Disposals		Water Pumps	
Toilets		Water Heaters		Water Service	
Urinals		Water Softeners		Sewer Connection	
Sinks		Other			

Water Service: (Check) Public Private
Sewer Service: (Check) Public Private (Septic Permit #) _____

MECHANICAL SECTION: ESTIMATED COST OF CONSTRUCTION (Mechanical construction value) \$ _____

Enter the number and size of Units being Replaced or Installed

Forced Air Furnace		Space Heater		A/C Compressor	
Solid fuel Appliance		Unit Heater		Split A/C Unit	
Heat Pump		Boiler		Coil Unit	
Air Handling Unit		Gravity Furnace		Gas/Oil Conversion	
Electric Furnace		Incinerator		Air Cleaner	
Other:					

Fuel Type: Gas Oil L.P. Electric Coal Wood Other

FIRE PROTECTION: ESTIMATED COST OF CONSTRUCTION (Fire Protection construction value) \$ _____

Sprinkler System Alternate Suppression System Fire Alarm Other : _____

No. Heads		No. Pull Station		Other	
No. Flows		No. Beam Det.		Other	
No. Tamperers		No. FDC			
No. Detectors		Other			
No. Horn/Strobes		Other			

ELECTRICAL SECTION: ESTIMATED COST OF CONSTRUCTION (Electrical construction value) \$ _____

Enter the number and size of Fixtures being Repaired, Replaced or Installed

Service Amps: _____ Number of circuits: _____ Number of service outlets: _____ 110V _____ 220V

List devices	Qty	Load/Output	List devices	Qty	Load/Output	List devices	Qty	Load/Output
Switches			Dishwasher			Heater		
Receptacles			Washer			Hot Water Heater		
Circuit Panel			Dryer					
Lights			Spa / Hot Tub					
Smoke Det.			A/C Unit					

FLOODPLAIN:

Is the site located within an identified flood hazard area? YES NO
 Will any portion of the flood hazard area be developed? YES NO

Owner/Agent shall verify that any proposed construction and/or development activity complies with the requirements of the National Flood Insurance Program and the Pennsylvania Flood Plain Management Act (Act 166-1978), specifically *Section 60.3*

Lowest Floor Level: _____

HISTORIC DISTRICT:

Is the site located within a Historic District? YES NO

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 Warminster Township. 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 Warminster Township or any other governing body. The applicant certifies he/she understands all the applicable codes, ordinances and regulations.

Application for a permit shall be made by the *owner* of the building or structure, or their *agent* in connection with the proposed work.

I certify that the Building Code Official or the Building Code Official'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 of Owner or Authorized Agent

Print Name of Owner or Authorized Agent

Date

(FOR ADMINISTRATIVE USE ONLY)

ADDITIONAL PERMITS/APPROVALS REQUIRED

STREET CUT/DRIVEWAY	APPROVED	YES	NO	BY:	DATE:
PENNDOT HIGHWAY OCCUPANCY	APPROVED	YES	NO	BY:	DATE:
DEP FLOODWAY OR FLOODPLAIN	APPROVED	YES	NO	BY:	DATE:
SEWER CONNECTION	APPROVED	YES	NO	BY:	DATE:
ON-LOT SEPTIC	APPROVED	YES	NO	BY:	DATE:
ZONING	APPROVED	YES	NO	BY:	DATE:
FIRE MARSHAL :	APPROVED	YES	NO	BY:	DATE:
OTHER:	APPROVED	YES	NO	BY:	DATE:
OTHER:	APPROVED	YES	NO	BY:	DATE:

APPROVALS

PERMIT DENIED: DATE: _____ DATE RETURNED: _____

PERMIT APPROVED: DATE: _____

CODE ADMINISTRATOR: _____

DATE ISSUED: _____ DATE EXPIRES: _____ PERMIT #: _____

BUILDING PERMIT FEE	\$	RECEIPT #
PLUMBING PERMIT FEE	\$	RECEIPT #
MECHANICAL PERMIT FEE	\$	RECEIPT #
ELECTRICAL PERMIT FEE	\$	RECEIPT #
FIRE PERMIT FEE	\$	RECEIPT #
PLAN REVIEW FEE	\$	RECEIPT #
STATE UCC FEES	\$	RECEIPT #

TOTAL OF ALL FEES: \$ _____

PROJECT DOCUMENTS (DRAWINGS & CALCULATIONS)

TYPE OF DOCUMENT:	SUBMITTED		SIGNED & SEALED		DATE:	REVISION DATE:
PLOT PLAN	YES	NO	YES	NO	_____	_____
CONSTRUCTION DRAWINGS	YES	NO	YES	NO	_____	_____
ELECTRICAL DRAWINGS	YES	NO	YES	NO	_____	_____
MECHANICAL DRAWINGS	YES	NO	YES	NO	_____	_____
PLUMBING DRAWINGS	YES	NO	YES	NO	_____	_____
FIRE PROTECTION DRAWINGS	YES	NO	YES	NO	_____	_____
FLOOD HAZARD AREA DATA	YES	NO	YES	NO	_____	_____
MFG SPECIFICATIONS.	YES	NO	YES	NO	_____	_____