# Pequea Township

1028 Millwood Road
Willow Street, PA 17584

## Commercial Application for a Building/Zoning Permit

**Application Type:** ☐ Zoning Permit ☐ Building and Zoning Permit

**Third Party Plan Review and Code Inspection Agency**
**(Choose One for Building Permit Only)**

☐ **Commonwealth Code Inspection Service, Inc.****
**Attn: Pete Kingsley**
176 Doe Run Road
Manheim, PA 17545
Phone: 717-278-0964
E-mail: petek@commonwealthcode.com

****Also fill out Commonwealth Code Inspection Service's Commercial Building Permit Application**

☐ **Code Administrators, Inc.****
**Attn: Shawn Strausbaugh**
1862 Charter Lane, Suite 101
Lancaster, PA 17601
Phone: 717-859-3350
E-mail: shawn@codeadministrators.com

****Also fill out Code Administrators' Commercial Building Permit Application**

**TOWNSHIP USE ONLY**

Zoning Permit Fee $_____

UCC Administrative Fee $ _____

UCC Training Fee $ _____

Certificate of Occupancy $ _____

Other _____ $ _____

Township Stormwater Fee $ _____

**Total** **$ _____**

Application Received Date: _____

Application Complete Date: _____

Permit Issued Date: _____

**PERMIT NUMBER:** _____ (To Be Completed by Township)

**TAX PARCEL ACCOUNT NUMBER:** 510 - _____ **ZONING DISTRICT:** _____

**SITE INFORMATION**

Project Name _____

Street Address _____

City _____ Zip Code _____

**APPLICANT**

Name of Applicant _____

Address of Applicant _____

Phone #_____ Email_____

**OWNER OF RECORD**

Name of Owner _____

Address of Owner _____

Phone #_____ Email_____

**APPLICATION TYPE AND USE**

- ☐ Accessibility Only Review
- ☐ Alteration or Renovation
- ☐ New Structure or Facility
- ☐ Plan Revision
- ☐ Unapproved Existing Building
- ☐ New Building

Use/Occupancy Classification _____

_____

Type of Construction _____

**PROJECT INFO**

Brief Description of Project _____

_____

Cost of Construction _____

Height _____ Length _____ Width _____ Total Square Feet (L x W) _____

Proposed Impervious _____ square feet
Proposed Earth Disturbance _____square feet

**DESIGN PROFESSIONAL**

Name _____ Seal (required)

Address _____

_____

PA License # _____

Email _____

Phone _____

ALL APPLICATIONS MUST BE SUBMITTED WITH:

- 3 sets of stamped construction drawings
- A site plan that includes distances to all property lines
- Accessibility information (parking, accessible route)
- Signature of property owner

**ANY APPLICATION WITH MISSING INFORMATION OR REQUIRED DOCUMENTS WILL BE RETURNED AS INCOMPLETE.**

**The holder of a building/zoning permit is responsible to ensure compliance with all applicable Township Ordinances during and at completion of the work authorized by the permit. The holder of the building/zoning permit acknowledges that the Township requires a final inspection be performed by the Building Inspector/Zoning Officer and that the Building Code Official/Zoning Officer issue a certificate of use and occupancy before the structure which is authorized by this permit may be occupied. Occupancy of a structure prior to the issuance of a certificate of use and occupancy constitutes a violation.**

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 assume 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.

Application 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 hereby authorize the designated Township officials to enter on the property and to investigate, inspect, and examine the Property set forth herein, including land and structures, to determine compliance with the Construction Code and/or Zoning Ordinance and to determine the accuracy of the statements contained herein.***

I am aware that I cannot commence excavation or construction until the Township has issued a Building or Zoning Permit. By signing this Application, I certify that all facts in the Applicant and all accompanying documentation are true and correct. This Application is being made by me to induce official action on the part of the Township, and I understand that any false statements made herein are being made subject to the penalties of 18 Pa. C.S. §4904 relating to unsworn falsification to authorities.

I expressly acknowledge that the issuance of a Building or Zoning Permit is based upon the facts stated and representations made in this Application. I expressly acknowledge that the Township may revoke a Building or Zoning Permit if the use and/or structure for which it has been issued violate any applicable Township, County, State or Federal law or regulation. I also expressly acknowledge that the Township may revoke a Building or Zoning Permit if it has been issued in error or if issuance was based upon any misrepresentations or errors contained in the Application or otherwise made by the Applicant.

I acknowledge that the holder of a Building or Zoning Permit is responsible to ensure compliance with all applicable Township Ordinances during and at completion of the work authorized by the Permit. I acknowledge that the Township requires a final inspection be performed by the construction code official and that the Township issue a certificate of occupancy before the structure which is authorized by this permit may be occupied**.**

***It is my responsibility to ensure that this inspection is scheduled and the certificate of occupancy obtained before the structure may be occupied. I acknowledge that if I occupy or permit the occupancy of this structure prior to the issuance of a certificate of occupancy under the Construction Code and/or Zoning Ordinance, I will have committed a violation of the Construction Code and will be subject to the penalties and remedies in the Construction Code Ordinance. I also acknowledge that, if the structure is occupied prior to the final inspection, work may have to be removed and re-executed in order that it may be adequately inspected. If the Township is required to perform an inspection after the structure is occupied, intending to be legally bound hereby, I agree to pay the fee established by the Township for delinquent inspections.***

Nothing contained in this Application shall be construed to relieve or limit the obligations of the Applicant to comply with all provisions of the Zoning Ordinance or to waive violations of the Zoning Ordinance or any other Township ordinances or to stop the Township from enforcing Township ordinances, including but not limited to the Zoning Ordinance. I expressly acknowledge that permits and certificates of use and occupancy may be required under the Zoning Ordinance and it is my obligation to obtain all permits and approvals the Zoning Ordinance requires before the structure, which is authorized by the Building Permit, may be occupied.

**SIGNATURE REQUIRED**

Applicant's Signature _____ Date _____

Owner's Signature _____ Date _____
(if different from Applicant)

**The signatory hereby agrees that all permit fees (building and zoning) shall be due to the municipality upon submission of the application regardless of permit issuance status. Furthermore, all permit fees are due within 15 days of applicant notification by the municipality.**

**If the applicant is a contractor:**

**1.** A contractor within the meaning of Act 44 of the Pennsylvania Workers' Compensation Law

☐ Yes ☐ No

If the answer is Yes, complete Sections A **OR** B below, as appropriate

**A. Insurance Information:**

Name of Applicant_____

Federal or State Employer Identification Number_____

Applicant is a qualified self-insurer for Workers' Compensation

☐ Certificate attached

Name of Workers' Compensation Insurer_____

Workers' Compensation Insurance Policy Number_____

Workers' Compensation Insurance Policy Expiration Date_____

**--OR--**

**B. Exemption:**

Contractor is not required to provide Workers' Compensation Insurance under the provisions of Pennsylvania Workers' Compensation Law for one of the following reasons, as indicated:

☐ Contractor with no employees. Contractor prohibited by law from employing any individual to perform work pursuant to this building permit unless contractor provides proof of insurance to the Township.

☐ Religious exemption under the Workers' Compensation Law.

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## NOTE:

**ALL PERMIT APPLICATIONS SHALL BE RETURNED TO:**

**Solanco Engineering Associates, LLC**
103 Fite Way, Suite C
Quarryville, PA 17566

**Phone: (717) 786-0355** **Fax: (717) 806-5748**

**Email: tiffany@solancoengineering.com**