

**COLERAIN TOWNSHIP
BUILDING/ZONING & FIRE PROTECTION
PERMIT APPLICATION**

1803 Kirkwood Pike * Kirkwood, PA 17536

717-529-2570 (phone) * 717-529-2199 (fax)

www.coleraintwppa.com

I. TOWNSHIP USE ONLY

Date Issued: / /	Permit #	Approved By:	
Permit Fee: \$		<input type="checkbox"/> Cash <input type="checkbox"/> Check	
State Surcharge: \$		Check #	
Certificate of Occupancy: \$		Receipt #	When Ready: Mail or Call Appl#
Other Fee: \$		Date Fee Paid: / /	Collected By:
Total Permit Fees: \$		Time/Date Stamp when received:	

II. LOCATION OF JOB

Site Address:

III. PERMIT-TYPE OF WORK (one per application)

<input type="checkbox"/> Residential	OR	<input type="checkbox"/> Commercial	<input type="checkbox"/> Building	<input type="checkbox"/> Zoning	<input type="checkbox"/> Fire Protection
Flood Zone-					
<input type="checkbox"/> New Home <input type="checkbox"/> New Building <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Pool <input type="checkbox"/> Fence <input type="checkbox"/> Deck <input type="checkbox"/> Porch <input type="checkbox"/> Shed					
<input type="checkbox"/> Mechanical <input type="checkbox"/> Plumbing <input type="checkbox"/> Demolition <input type="checkbox"/> **Electrical** <input type="checkbox"/> Other (Fire Protection-see below)					
<input type="checkbox"/> Fire Alarm System <input type="checkbox"/> Fire-Sprinkler System <input type="checkbox"/> Standpipe System <input type="checkbox"/> Dry/Wet Chemical System <input type="checkbox"/> Fire Hydrants					
Description of Work:				Total Project Cost: \$	

IV. OWNER **Email-**

Name:	Phone Number: ()
Address:	City, State, Zip:

V. APPLICANT **Email-** CHECK IF SAME AS OWNER

Name:	Relationship to Owner:
Address:	Phone Number: ()
City, State, Zip:	Fax Number: ()

VI. CONTRACTOR Email:		<input type="checkbox"/> CHECK IS SAME AS APPLICANT
Name: _____		
Address: _____		Phone Number: () _____
City, State, Zip: _____		Fax Number: () _____

VII. WORKMEN'S COMPENSATION INSURANCE COVERAGE INFORMATION	
THE APPLICANT IS: THE OWNER OF THE PROPERTY? <input type="checkbox"/> YES (if yes GO TO BOX A) <input type="checkbox"/> NO (if no GO TO BOX B)	
BOX A. SIGN HERE & GO TO STEP VIII:	
BOX B. CONTINUE FILLING OUT SECTION VII: THE APPLICANT IS: A CONTRACTOR WITHIN THE MEANING OF THE PENNSYLVANIA WORKER'S COMPENSATION LAW? <input type="checkbox"/> YES OR <input type="checkbox"/> NO (Continue to Box C)	
BOX C: SIGN HERE & GO TO STEP VIII:	

VIII. APPLICANT SIGNATURE	
I HEREBY CERTIFY THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER OF RECORD AND THAT I AM THE HOMEOWNER OR HAVE BEEN AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION AS HIS/HER AUTHORIZED AGENT AND WE AGREE TO ALL APPLICABLE LAWS OF THIS JURISDICTION.	
Applicant Name (print): _____	Date: ____/____/____
Applicant Signature: _____	

- PLEASE NOTE: Before any application can be given to a Building Inspector for review, the following IS REQUIRED...
- 1- PA State Registration# _____ (for Residential Only)
 - 2- Workers Compensation Certificate attached (or Page 4 notarized for exemption) (For Commercial Applications Only)
 - 3- Payment of all Application fees
 - 4- Stamped Electrical Plans from an Electrical Inspection Agency IF you are doing ANY electrical work as part of this application
 - 5- A Site or Plot Plan MUST be included with this application showing all Street locations, all setbacks from property lines to proposed work, and all easements, right of ways, basins and any other restricted features on site. (Attach copy or draw on Page 3)
 - 6- If required, a copy of your Home Owners Association (HOA) approval letter MUST be attached for all outside work.

All Applicants building an addition, a new home or a new building MUST complete the following information:

IX. SITE INFORMATION	
Water Service: <input type="checkbox"/> Private	Sewer Service: <input type="checkbox"/> Private
Fuel Source: <input type="checkbox"/> Electric <input type="checkbox"/> Natural Gas <input type="checkbox"/> LPG Gas <input type="checkbox"/> Oil <input type="checkbox"/> Other (List)	

X. BUILDING INFORMATION	
Building Code Use Group:	Specific Use:
Change in Use <input type="checkbox"/> Yes <input type="checkbox"/> No- if YES, attach Change of Occupancy Form.	
Existing Building Area (In Square Feet):	
Total Building Area (In Square Feet):	
Height of Structure Above Grade:	
Maximum Occupancy Load (Commercial Applications Only):	
Maximum Live Load (Commercial Applications Only):	
Is Building equipped with an Automatic Sprinkler System? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Code Edition:	

XI. DRAW PLOT PLAN HERE OR ATTACH DRAWING

XII. WORKERS' COMPENSATION EXEMPTION

COMPLETE IF THE APPLICANT IS A CONTRACTOR CLAIMING EXEMPTION
FROM WORKERS' COMPENSATION INSURANCE.

The undersigned swears or affirms that he/she is not required to provide workers' compensation insurance under the provisions of Pennsylvania's 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.

Applicant Signature _____

Address _____

County of Lancaster

Municipality of Colerain Township

APPENDIX D

Exemption Application

Date Received _____ File Number _____ Property Acct # _____
Submitted Fees \$ _____ Approval of Application Date _____

Project Street Address: _____

Owner's Name: _____

Signature* †: _____

Phone# / Fax# / Email: _____

Person/Firm to be completing work: _____

Phone# / Fax# / Email: _____

• The Proposed Activity will not result in the disturbance of land within Floodplains, Wetlands,

Proposed Activity: _____ *All property owners must sign application

■ After May 5, 2014 have you previously added impervious surface on this property?

- No
- Yes - Total area of previous impervious surface _____ sq. ft.

■ Are you removing existing impervious surface as part of this project?

- No
- Yes - Impervious surface to be removed _____ sq. ft.

■ Addition of Impervious Surface (1,000 square feet or less)

- Total new impervious surface proposed _____ sq. ft.

Type of new impervious surface: driveway, shed, garage, deck, walkway,

other (please describe) _____

■ Removal of ground cover, grading, filling, or excavation of an area

† Total area of land disturbance: _____ sq. ft.

Type of regulated removal activity (check all that apply): Ground Cover, Grading, Filling,

Excavation, Other earth disturbance activity (please describe) _____

Check all items below that will be impacted by the project:

- Floodplain
- Wetlands
- Slopes greater than 15%
- Known bedrock within 6 ft. of the ground surface
- Riparian Forest Buffer
- Natural water flow paths (creeks, streams, ponds, swales, etc.)
- Existing known stormwater problem areas
- Downstream property owners

By my signature below, I certify to the Township that, to the best of my knowledge, the following statements are true:

Environmentally Sensitive Areas, Riparian Forest Buffers, or slopes greater than 15%.

- The Proposed Activity will not be conducted within any existing drainage or storm water easement created by or shown on any recorded plan.
- The Proposed Activity will minimize soil disturbance, take steps to minimize Erosion during construction activity, and promptly reclaim all disturbed areas with topsoil and vegetation.
- The Proposed Activity will not adversely impact any existing known problem areas or downstream property owners of the quality of Runoff entering any Storm Sewer.
- I will minimize soil disturbance, take steps to minimize Erosion during construction activity, and promptly reclaim all disturbed areas with topsoil and vegetation.
- I will take steps to insure that Runoff will be directed to Pervious Areas on the subject property. No Runoff will be directed onto an abutting street or neighboring property.
- I acknowledge the Township's right to review the provided information, at my expense, and to deny this application or to revoke this permit application if any of the above statements are found to be false.

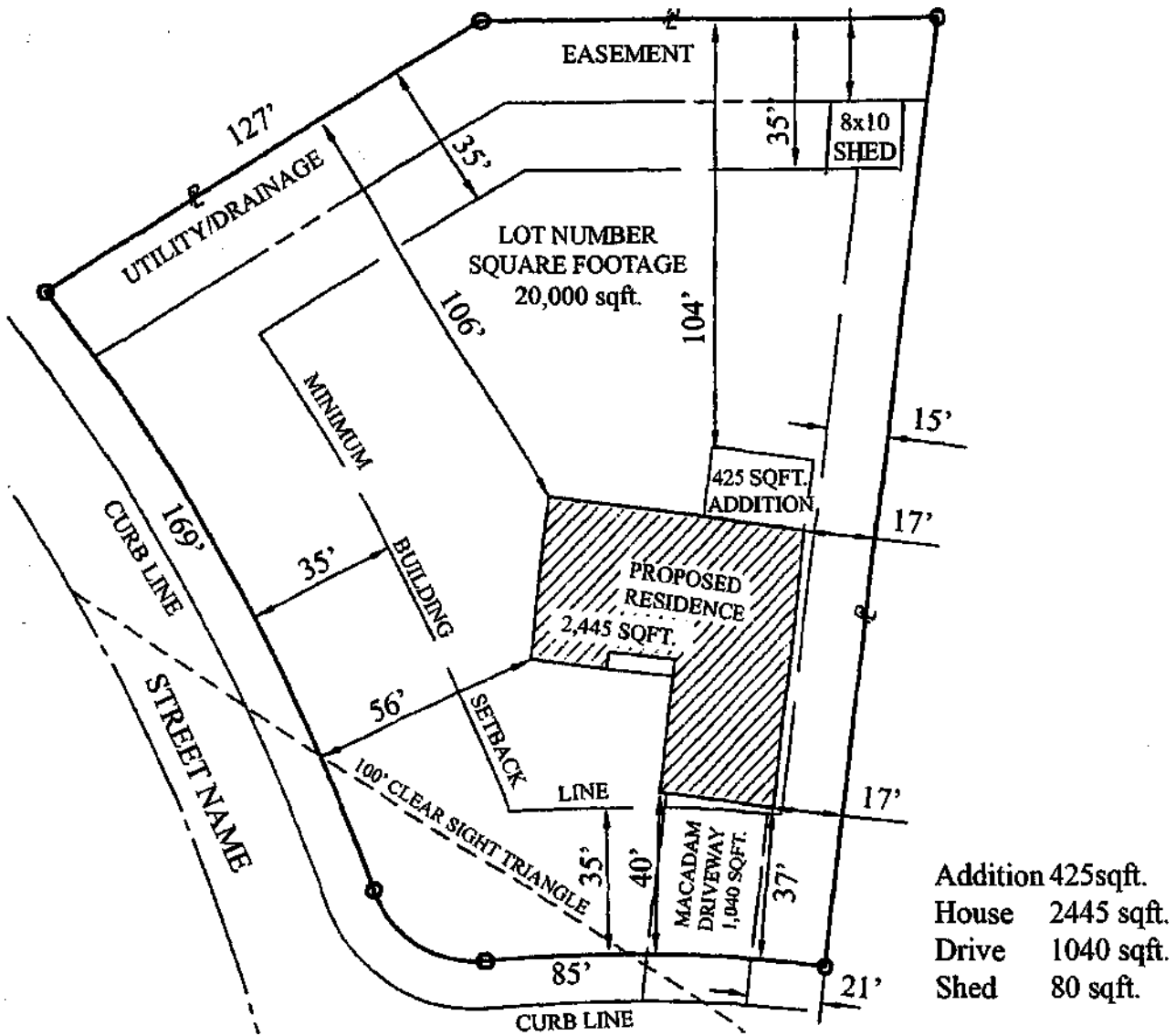
Signature _____

ZONING SITE PLAN REQUIREMENTS

The following must appear on all site plans:

- ◆ Location of all property lines. Include length of all property lines and include the size of your lot in square feet.
- ◆ Location of all existing buildings and improvements, including but not limited to, residence, driveways, walkways, sheds, decks, patios, porches, swimming pools, garages, hot tubs, and any other outbuildings.
- ◆ Location of all proposed projects and other improvements, including but not limited to, driveways, walkways, sheds, decks, patios, porches, swimming pools, garages, hot tubs, and any other outbuildings.
- ◆ Exact dimensions, including the area calculations in square feet, of all existing and proposed improvements on the property, including but not limited to, residence, driveways, walkways, sheds, decks, patios, porches, swimming pools, garages, hot tubs, and any other outbuildings.
- ◆ Exact dimensions from all existing and proposed improvements to all property lines, including but not limited to, residence, driveways, walkways, sheds, decks, patios, porches, swimming pools, and any other outbuildings.
- ◆ Location of all easements on the property, both public and private including the exact dimensions of the easements.
- ◆ Location of the 100-year floodplain and the 100-year floodplain elevation, if applicable. Boundaries of the 100-year floodplain must be field staked prior to any on site construction, if applicable. (Floodplain maps are available at the FEMA website)
- ◆ Location and dimension of any clear sight triangles on the property.
- ◆ Location of all required Colerain Township building setback lines. (See Zoning Ordinance)
- ◆ Location of all public street rights-of-way.
- ◆ Location of all public streets, including curb and sidewalk, if applicable.
- ◆ Location of an on-lot sewage system, if applicable.
- ◆ Location of all wetland areas, if applicable.
- ◆ Location of all municipal boundaries, if applicable.

SAMPLE SITE PLAN



Colerain Township - Lancaster County

Sketch

Provide a site plan (see sample site plan)