

HAZLE TOWNSHIP BUILDING DEPT.

MAIL Address: P.O. BOX 506

HARLEIGH, PA 18225-0506

PHONE: 570 455-2030 FAX: 570 453-2402

Delivery Address: 101 West 27th Street, Hazle Township, Pa. 18202

BUILDING AND ZONING PERMITS

RESIDENTIAL APPLICATION

NEW CONSTRUCTION, ADDITIONS & MAJOR ALTERATIONS

THE UNDERSIGNED APPLICANT UNDERSTANDS THAT FALSE STATEMENTS HEREON ARE MADE SUBJECT TO THE CRIMINAL PENALTIES OF 18 Pa. C.S.A. § 4904 RELATING TO UNSWORN FALSIFICATION TO AUTHORITIES. THIS APPLIES TO FALSE STATEMENTS MADE ANYWHERE ON ANY PAGE OF THIS APPLICATION.

ZONING DISTRICT: (Dept. Use Only)

BUILDING PERMIT #: A (Dept. Use Only)

LOCATION OF PROPOSED WORK OR IMPROVEMENT:

COUNTY: LUZERNE

MUNICIPALITY: HAZLE TOWNSHIP

SITE ADDRESS:

TAX PARCEL #: LOT: #

Subdivision/Land Development: SECTION:

OWNER: E-Mail:

MAILING ADDRESS:

City State Zip U.S. Veteran Yes No

PHONE #: Work: Home: FAX:

All contractors & sub-contractors must have either a PAOAGHIC or a Hazle Township License.

PRINCIPAL CONTRACTOR: Lic. #

CONTRACTOR'S ADDRESS: E-Mail:

City State Zip

PHONE #: Work: Home: FAX:

SUB-CONTRACTORS NAME: Lic. #

SUB-CONTRACTORS NAME: Lic. #

SUB-CONTRACTORS NAME: Lic. #

(Add Additional Sheet if Necessary)

ARCHITECT:

MAILING ADDRESS: E-Mail:

City State Zip

PHONE #: Work: Home: FAX:

(OVER)

TYPE OF WORK OR IMPROVEMENT: *(Check One)*

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

Describe the proposed work: _____

PERMIT & PLAN REVIEW:

Hazle Twp reserves the right to use the most current ICC Building Valuation construction cost table for permit and plan review cost tabulation for all building types and occupancies. Hazle Twp Ordinance # 98-6-8-2 page 107 and Resolution 98-18 page 108.

ESTIMATED COST: _____

WHEN WILL WORK BEGIN: _____ END: _____

PLOT PLAN ATTACHED: YES NO

SETBACKS: FRONT _____ SIDE (L) _____ SIDE (R) _____ REAR _____

DEED or WARRANTY: **(Attached)** YES NO

BUILDING PLANS (**2 SETS**) **(Attached)**: YES NO

ARCHITECT/ENGINEER STAMP AND SIGNED: YES NO

(If NEEDED – Elevator, Escalator, Lifts, etc.) LABOR & INDUSTRY APPROVAL: YES NO

WILL THERE BE ANY DEMOLITION OR CONSTRUCTION WASTE MATERIALS??????? (Shingles, wood, glass, asbestos, brick, concrete, soil, etc.) YES NO If YES, what is the material(s) and the location where it will be disposed and Disposal Contractors Name: _____

WILL THERE BE WATER RUNOFF? YES NO If YES, Explain where it will go and how it will be controlled: _____

EROSION & SEDIMENTATION PLAN: YES – Attach Copy NO

DESCRIPTION OF BUILDING USE: *(Check One)*

- One-Family Dwelling (R-3)
 Two-Family Dwelling (R-3)
 Townhouse (R-3)

BUILDING/SITE CHARACTERISTICS:

NUMBER of Residential Dwelling Units: _____ Existing, _____ Proposed
MECHANICAL: Indicate Type of Heating/Ventilating/Air Conditioning (*i.e.*, electric, gas, oil, etc.) _____

WATER SERVICE: (*Check*) Public Private
SEWER SERVICE: (*Check*) Public Private -- On Lot:(Septic Permit # _____
SOIL TYPE: _____ SLOPE: Average: _____ % Steepest: _____ %

Does or will your building contain any of the following:

FIREPLACE(s): Number _____ Type of Fuel _____ Type Vent _____
ELEVATOR/Escalators/Lifts/Moving walks: (*Check*) YES NO
SPRINKLER SYSTEM: YES NO
PRESSURE VESSELS: YES NO REFRIGERATION SYSTEMS: YES NO

BUILDING DIMENSIONS:

PROPOSED BUILDING: Total Gross Floor Area: _____ sq. ft. Number Of Stories: _____
Length: _____ Width: _____ Height of Structure Above Grade: _____

EXISTING BUILDING: Total Gross Floor Area: _____ sq. ft. Number Of Stories: _____
Length: _____ Width: _____ Height of Structure Above Grade: _____

FLOODPLAIN N/A

Is the site located within an identified flood hazard area? (*Check One*) YES NO

If Yes: Will any portion of the flood hazard area be developed? (*Check One*) 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

If construction is proposed within a Historic District, a certificate of appropriateness may be required by the Municipality.

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.

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 certify that the code administrator or the code administrators 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.

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I HAVE READ AND UNDERSTAND ALL OF THE STATEMENTS MADE IN THIS ABOVE APPLICATION AND HAVE DISCUSSED ANY QUESTIONS WITH THE ISSUING OFFICER.

Signature of Owner or Authorized Agent

Print Name of Owner or Authorized Agent

Date: _____

Directions to Site: _____

(FOR CODE ADMINISTRATOR USE ONLY)

PROJECT DOCUMENTS (DRAWINGS & CALCULATIONS)

<u>Type of document:</u>	<u>Submitted</u>	<u>Signed & Sealed</u>	<u>Date:</u>	<u>Revision Date:</u>
Foundation Plans	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Construction Drawings	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Electrical Drawings	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Mechanical Drawings	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Plumbing Drawings	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Specifications	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Flood Hazard Area Data	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____

_____ **Incomplete** _____ **Needs ZHB Approval** _____ **Needs Planning Commission Approval**

DATE REJECTED: _____ By: _____

DATE ACCEPTED: _____ TIME: _____ BY: _____

ADDITIONAL PERMITS/APPROVALS REQUIRED:

STREET CUT PERMIT:	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> APPROVED	<input type="checkbox"/> DISAPPROVED
TOWNSHIP HIGHWAY OCCUPANCY:	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> APPROVED	<input type="checkbox"/> DISAPPROVED
SEWER CONNECTION:	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> APPROVED	<input type="checkbox"/> DISAPPROVED
ON-LOT SEPTIC:	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> APPROVED	<input type="checkbox"/> DISAPPROVED
HAZLE TOWNSHIP ZONING:	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> APPROVED	<input type="checkbox"/> DISAPPROVED
HAZLE TOWNSHIP PLANNING:	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> APPROVED	<input type="checkbox"/> DISAPPROVED
WORKERS COMP CERTIFICATE	<input type="checkbox"/> YES <input type="checkbox"/> NO		
PENNDOT HIGHWAY OCCUPANCY:	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> APPROVED	<input type="checkbox"/> DISAPPROVED
DEP FLOODWAY OR FLOODPLAIN:	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> APPROVED	<input type="checkbox"/> DISAPPROVED
FAA APPROVAL:	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> APPROVED	<input type="checkbox"/> DISAPPROVED
HARB APPROVAL:	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> APPROVED	<input type="checkbox"/> DISAPPROVED
CUT AND FILL:	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> APPROVED	<input type="checkbox"/> DISAPPROVED
OTHER _____:	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> APPROVED	<input type="checkbox"/> DISAPPROVED

APPROVALS:

BUILDING PERMIT APPROVED: Date _____ By: _____

W/Conditions: _____

ZONING OFFICER _____

BUILDING CODE OFFICIAL _____

Date Issued _____ Date Expires _____ PERMIT # _____

BUILDING PERMIT FEE \$ _____ RECEIPT # _____

PLUMBING PERMIT (if applicable) \$ _____ RECEIPT # _____

MECHANICAL PERMIT (if applicable) \$ _____ RECEIPT # _____

ELECTRICAL PERMIT (if applicable) \$ _____ RECEIPT # _____