

**CONOY TOWNSHIP**  
211 Falmouth Road  
Bainbridge, Pennsylvania 17502  
Lancaster County

Phone: 717-367-4927  
Fax: 717-367-6299

**CONSTRUCTION CODE PERMIT APPLICATION**

**LOCATION OF PROPOSED WORK OR IMPROVEMENT:**

Site Address: \_\_\_\_\_ Tax Parcel # \_\_\_\_\_

Lot # \_\_\_\_\_ Subdivision/Land Development: \_\_\_\_\_ Phase: \_\_\_\_\_

Owner: \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Mailing Address \_\_\_\_\_ E-Mail: \_\_\_\_\_

Principal Contractor: \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Mailing Address \_\_\_\_\_ E-Mail: \_\_\_\_\_

Subcontractor: \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Mailing Address \_\_\_\_\_ E-Mail: \_\_\_\_\_

Subcontractor: \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Mailing Address \_\_\_\_\_ E-Mail: \_\_\_\_\_

Architect: \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Mailing Address \_\_\_\_\_ E-Mail: \_\_\_\_\_

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

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

Describe the current condition of the property: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Describe the proposed work: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**ESTIMATED COST OF CONSTRUCTION** (reasonable fair market value) \$ \_\_\_\_\_

**DESCRIPTION OF BUILDING USE** (*Check One*)

RESIDENTIAL

NON-RESIDENTIAL

- One-Family Dwelling
- Two-Family Dwelling
- Multiple family dwelling
  
- Townhouse Dwelling

Specific Use: \_\_\_\_\_  
 Use Group: \_\_\_\_\_  
 Change In Use  YES  NO  
 If YES, indicate former: \_\_\_\_\_  
 Maximum Occupancy Load: \_\_\_\_\_  
 Maximum Live Load: \_\_\_\_\_

**ATTACH A COPY OF THE ZONING PERMIT ISSUED BY THE ZONING OFFICER AUTHORIZING THE ABOVE-DESCRIBED USE. THIS APPLICATION IS NOT COMPLETE WITHOUT A COPY OF THE ZONING PERMIT. IF THE ABOVE-DESCRIBED USE OR THE CONSTRUCTION WAS THE SUBJECT OF ANY HEARINGS BEFORE THE ZONING HEARING BOARD, THIS APPLICATION IS NOT COMPLETE WITHOUT A COPY OF THE DECISION OF THE ZONING HEARING BOARD.**

Recording reference of subdivision or land development plan: \_\_\_\_\_

Does the work require an erosion and sedimentation control plan?  YES  NO  
 If yes, provide proof that the Lancaster County Conservation District has approved the erosion and sedimentation control plan.

Does the work require installation of a new driveway to access a public street?  YES  NO

**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*)  Private  
 Public (*If new construction, attach a copy of the connection permit issued by the public water service provider*)

**Sewer Service:** (*Check*)  Private (Septic Permit # \_\_\_\_\_)  
 Public (*If new construction, attach a copy of the connection permit issued by the public sewer service provider*)

**Does or will your building contain any of the following:**

**Fireplace(s):** Number \_\_\_\_\_ Type of Fuel \_\_\_\_\_ Type Vent \_\_\_\_\_

**Elevator/Escalator/Lifts/Moving Walks** (*Check*)  YES  NO

**Sprinkler System:**  YES  NO

**Pressure Vessels:**  YES  NO

**Refrigeration Systems:**  YES  NO

**BUILDING DIMENSIONS**

Existing Building Area \_\_\_\_\_ sq. ft.      Number of Stories \_\_\_\_\_  
 Proposed Building Area \_\_\_\_\_ sq. ft.      Height of Structure Above Grade: \_\_\_\_\_ ft.  
 Total Building Area \_\_\_\_\_ sq. ft.      Area of the Largest Floor: \_\_\_\_\_ sq. ft.

**FLOODPLAIN**

Is the site located within an identified flood hazard area? *(Check One)*     YES     NO  
Will any portion of the flood hazard area be developed? *(Check One)*     YES     NO     N/A

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 established pursuant to Act 167?     YES     NO  
*If construction is proposed within a Historic District, a certificate of appropriateness may be required by the Municipality.*

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 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 Construction Code 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 Construction Code Permit is based upon the facts stated and representations made in this Application. I expressly acknowledge that the Township may revoke a Construction Code Permit if the use and/or structure for which it has been issued violates any applicable Township, County, State or Federal law or regulation. I also expressly acknowledge that the Township may revoke a Construction Code 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 Construction Code Permit is responsible to insure compliance with all applicable Township Ordinances during and at completion of the work authorized by the Construction Code 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 Construction Code permit may be occupied. It is my responsibility to insure 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, 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 reexecuted 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 Construction Code Permit may be authorized.

\_\_\_\_\_  
Signature of Owner or Authorized Agent

\_\_\_\_\_  
Print Name of Owner or Authorized Agent

\_\_\_\_\_  
Address

\_\_\_\_\_  
Date

Directions to site: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**ADDITIONAL PERMITS/APPROVALS REQUIRED**

<input type="checkbox"/> SUBDIVISION OR LAND DEVELOPMENT PLAN	APPROVED _____
<input type="checkbox"/> STORM WATER MANAGEMENT PERMIT	APPROVED _____
<input type="checkbox"/> EROSION AND SEDIMENTATION CONTROL	APPROVED _____
<input type="checkbox"/> DRIVEWAY	APPROVED _____
<input type="checkbox"/> PENNDOT HIGHWAY OCCUPANCY	APPROVED _____
<input type="checkbox"/> DEP FLOODWAY OR FLOODPLAIN	APPROVED _____
<input type="checkbox"/> PUBLIC SEWER CONNECTION	APPROVED _____
<input type="checkbox"/> ON-LOT SEPTIC	APPROVED _____
<input type="checkbox"/> PUBLIC WATER CONNECTION	APPROVED _____
<input type="checkbox"/> ZONING	APPROVED _____
<input type="checkbox"/> HARB	APPROVED _____
<input type="checkbox"/> OTHER	APPROVED _____

**APPROVALS**

CONSTRUCTION CODE PERMIT DENIED: Date: \_\_\_\_\_ Date Returned \_\_\_\_\_

CONSTRUCTION CODE PERMIT APPROVED: Date: \_\_\_\_\_

CODE ADMINISTRATOR \_\_\_\_\_

Date Issued: \_\_\_\_\_ Date Expires \_\_\_\_\_ PERMIT # \_\_\_\_\_

CONSTRUCTION CODE ADMINISTRATIVE FEE \$50.00 RECEIPT # \_\_\_\_\_

CONSTRUCTION CODE STATE TRAINING FEE \$2.00 RECEIPT # \_\_\_\_\_

CONSTRUCTION CODE PLAN REVIEW FEE \$ \_\_\_\_\_ RECEIPT # \_\_\_\_\_

CONSTRUCTION CODE ESTIMATED INSPECTION FEE \$ \_\_\_\_\_ RECEIPT # \_\_\_\_\_

CONSTRUCTION CODE ADDITIONAL INSPECTION FEE \$ \_\_\_\_\_ RECEIPT # \_\_\_\_\_

PLUMBING PERMIT (if appl.) \_\_\_\_\_ RECEIPT # \_\_\_\_\_

MECHANICAL PERMIT (if appl.) \_\_\_\_\_ RECEIPT # \_\_\_\_\_

ELECTRICAL PERMIT (if appl.) \_\_\_\_\_ RECEIPT # \_\_\_\_\_

**PROJECT DOCUMENTS (DRAWINGS & CALCULATIONS)**

Type of document:	Submitted:	Signed & Sealed	Date:	Revision Date:
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	_____	_____
Workers Comp. Certificate	<input type="checkbox"/> Yes <input type="checkbox"/> No		_____	_____

# INSPECTION CHECKLIST

(FOR CODE ADMINISTRATOR USE ONLY)

Address: \_\_\_\_\_ Permit # \_\_\_\_\_

<u>Required</u>	<u>Type</u>	<u>Date</u>	<u>Inspector</u>	<u>Comments</u>
	Foundation #1	_____	_____	_____
	Foundation #2	_____	_____	_____
	Foundation #3	_____	_____	_____
	Masonry #1	_____	_____	_____
	Masonry #2	_____	_____	_____
	Masonry #3	_____	_____	_____
	Plumbing #	_____	_____	_____
	Plumbing #	_____	_____	_____
	Plumbing #	_____	_____	_____
	Mechanical #1	_____	_____	_____
	Mechanical #2	_____	_____	_____
	Mechanical #3	_____	_____	_____
	Electrical #1	_____	_____	_____
	Electrical #2	_____	_____	_____
	Electrical #3	_____	_____	_____
	Electrical #4	_____	_____	_____
	Framing #1	_____	_____	_____
	Framing #2	_____	_____	_____
	Framing #3	_____	_____	_____
	Wallboard #1	_____	_____	_____
	Wallboard #2	_____	_____	_____
	Wallboard #3	_____	_____	_____
	Final #1	_____	_____	_____
	Final #2	_____	_____	_____
	Final #3	_____	_____	_____
	Temporary C/O	_____	_____	_____
	Date Expires	_____	_____	_____
	Certificate of occupancy	_____	_____	_____