

<p style="text-align: center;"><b><i>East Caln Township</i></b>                  Chester County, Pennsylvania                  110 Bell Tavern Road ♦ Downingtown, PA 19335                  Phone: 610-269-7326 ♦ Fax: 610-269-9183</p>	<p><b>Application for Building &amp; Zoning Permit</b></p>
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**Type of Permit: (check the appropriate box)**

Addition	Alteration	Repair
Deck	Shed	Accessory Building
Fence	Swimming Pool/Spa	Demolition
Roof	Storage Tank	Driveway Expansion
New Residential	New Commercial	Other:

**Location of Improvement: Plot plan submission required for all improvements.**

Address:				
Tax Parcel Number:				
Zoning District:				
Lot Area in Square Feet:				
Building Coverage & %:	sq ft		%	
Impervious Coverage & %:	sq ft		%	
Property Line Setbacks:	Front:	ft	Rear:	ft
	Side:	ft	Side:	ft

**Cost of Improvement:**

Construction:	\$	Mechanical:	\$
Plumbing:	\$	Electrical:	\$
Total Project Costs	\$		

**Type of Utilities:**

Public Water:	yes   No	Public Sewer:	yes   No
On-site Water:	yes   No	On-site Sewer:	yes   No
Electric:	yes   No	Gas:	yes   No

**Description of work being done:**



**Characteristics of Building, Deck, Porch or Patio:**

Length:	Height:
Width:	Stories:
Floor Area:	

Framing:	Wood Masonry Steel	Other: (specify)
Footing:	Concrete Stone Piers Slab	Principal Building Use: Residential Commercial Industrial

**Swimming Pool (above & in-ground) & Spa:**

Type:	In-ground Above ground	Principal Material:
Length:		Width:
Depth: Minimum:		Manufacturer:
Maximum:		

**Note:** Both in-ground and above ground pools shall be surrounded by a fence or similar barrier that is not removable, un-climbable, at least four feet (4') in height, having a self-closing, self-latching gate.

**Accessory Buildings (i.e. Shed, Storage Barn, Garage)**

Type:	Wood Metal Masonry	Size: Length: _____ Width: _____ Height: _____ Square ft.:
		Foundation: Concrete Footings Floating concrete pad Not Applicable

**Street Openings:**

Type of Opening:	Street    Driveway    Utility
Reason for opening:	
	Type of Work:

Date of Work:	New   Repair   Replacement
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**Note: Pennsylvania One-Call, Act 38, is strictly enforced and the responsibility of the contractor to ensure all notifications have been completed.**

**Driveway Expansion:**

Lot Area:	Current Impervious coverage:
Size of Expansion	New Impervious coverage:

**Roofing and Re-roofing:**

Number of existing roofs:	Type of material to be used:
Roof pitch:	New Roof:    Yes    No
Dumpster on site:    Yes    No	Re-Roof:    Yes    No
Start Date:	Completion date:

**Demolition:**

Type of Structure:	
Utilities disconnected:	Yes    No

**Fences:**

Type of Fence:	Location:	Size:
Stockade    Estate Post & Rail Other:	Front Yard Side yard Rear yard	Height: Width:

**Identification of Owner/Occupant/Contractor/Architect-Engineer:**

<b>Owner:</b> <b>Occupant:</b>	
Address:	
Phone Number:	
<b>Contractor:</b>	
Address:	

Phone Number:	
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<b>Architect-Engineer</b>	
Address:	
Phone:	

<b>Electrical Inspection Agency:</b>	
<b>Electrical Plan Reviewer:</b>	

**I hereby certify that the proposed work is authorized by the Owner of Record and that the approved plan will be adhered to during construction. All work will be done within the guidelines of the East Caln Township Building and affiliated Codes, whether specified or not. Furthermore, I affirm that the information provided is true and accurate and acknowledge that any false statements are in violation of Pennsylvania Law, punishable by thirty days imprisonment and fines of \$1000 per day.**

Signature of Applicant:	
Print name of Applicant:	
Affiliation to Property:	
Date of Application:	

***Do not write below this line - Office Use Only***

Application Date:	Permit Fee: \$
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Permit Issued:	Permit Number:
Additional Permits Required:	Zoning      Plumbing      Electrical Fire Prevention      Use & Occupancy
Accepted By:	Fee Paid:
Zoning Approved by:	Approval Date:
Building Approved by:	Approval Date: