For Warwick Township Use Only



WARWICK TOWNSHIP

Dept. of Planning & Zoning 1733 Township Greene, Jamison, PA 18929 Phone: (215) 343-6100 www.warwick-bucks.org

Check #: Check Amount: Received by:

BUILDING PERMIT APPLICATION

Permit #: ___

| Site Address: | t have any green certificatio | Site/Contact | | | Primary Contact Person |
|--|---|--|---|---|------------------------------|
| will this perm | t nave any green certificatio | ns? (LEED, Energy | Star, etc.) | ES 🔄 NO | (check one) |
| _ | Name | | | | |
| Property Owner | Address | | | | |
| Owner | Phone | Email | | | |
| | Name | | PA Contractor's # | | |
| Applicant | Address | | | | |
| | Phone Email | | | | |
| Plumbing Alterative E Fireplace Roof Sign (with e Parking lot | ttached Garage nergy (Solar, Wind, Furnace) electric) | Electrical (incl Construction/ Deck/Patio Shed (over 14 Fence (enclosi Wireless Com Fire Sprinkler | hly Attic Renovation uding generators) Sales Trailer 4s/f) ng a pool) munication Facilities System | Alteration Detached Garage Mechanical/HVAC Hot Tub Pool Wall (over 4 ft. high) Sidewalk/Walkway Wells (Geothermal/Potential) | able) |
| Cost of Improver | nents: \$ | Project | Details | al or 🗌 Commerc | ial |
| e Footage of Proposed Improvement:s/f Height of Proposed Structure | | | | ft | |
| escription of Pro | | | | | |

Check the lines below indicating that the following has been submitted: _____ Two (2) complete sets of construction drawings ____ Two (2) sets of specifications ____ \$50.00 permit deposit

By signing this application, authorization is granted to any municipal representatives of Warwick Township to access the above property as stated within this application at any time, without an administrative warrant, to inspect and verify that any proposed use and/or structure contained within this application and/or that exists on the above property complies with all Warwick Township Ordinances.

| Print Name of Applicant: | Date: |
|--------------------------|-------|
| | |
| Signature of Applicant: | Date: |

The application together with the signed site plan and construction documents is made a part of this application by the undersigned. Furthermore, it is clearly understood and agreed to by the applicant and property owner that the Township office is not responsible for any property dimensions shown on the site plan and establishment of property lines is the sole responsibility of the property owner and applicant. The applicant and property owner also agree they are responsible for the replacement to Township standards of any Township road or infrastructure which is damaged during the building of the permitted structure and understands that the information provided on this application by the applicant(s) and property owner(s) is true and correct to the best of their knowledge or belief, and all information contained in this application becomes part of the public record. The applicant warrants the truthfulness of the information in the application, and that if any of the information provided is incorrect, the permit may be revoked. Furthermore, the application and permit can provide that if the permit is issued wrongfully, whether based on misinformation or an improper application of the code, the permit and certificate of occupancy may be revoked.

| | Name | PA Contractor's # | | |
|----------------------|---------|-------------------|--|--|
| General | Address | | | |
| Contractor | Phone | Email | | |
| | Name | PA Contractor's # | | |
| Mechanical/ HVAC* | Address | | | |
| HVAC ¹ | Phone | Email | | |
| | Name | PA Contractor's # | | |
| Electrical* | Address | | | |
| | Phone | Email | | |
| | Name | PA Contractor's # | | |
| Plumbing* | Address | | | |
| | Phone | Email | | |
| | Name | PA Contractor's # | | |
| Roofing* | Address | | | |
| | Phone | Email | | |
| | Name | PA Contractor's # | | |
| Other* | Address | | | |
| | Phone | Email | | |

* If applicable

| Type of Sewage Disposal Public or private company Private (septic tank, etc.) | | Building Dimensions Number of Stories | | |
|--|--|---------------------------------------|-------|-------------------------|
| | | | | |
| | | | | Total land area, in s/f |
| Type of Water Supply Public or private company Private (well, cistern) | | Finished Basement: Yes No | I | |
| Number of Bedrooms (Residential only) | | Number of Off-Street Parking S | paces | |
| Number of Bedrooms | | Enclosed/Garage | | |
| Number of Bathrooms Full | | Outdoors/Driveway | | |
| Partial | | | | |

| Cost of Construction | |
|----------------------------|----|
| Building: | \$ |
| Electrical: | \$ |
| Plumbing: | \$ |
| HVAC: | \$ |
| Other: | \$ |
| Total Cost of Improvement: | \$ |

| MECHANICAL | | | | | | |
|--|----|--|--------------------------|---------------------------------------|---|---|
| Type of Work (Check one): Installing New Equipment Altering Existing System Both | | Type of Fuel (Check one): Oil Natural Gas Electrical Propane Other | | | | |
| Heater Name: | | | Number of Heaters: | | | |
| Model Number: | | | BTUs: | | | |
| A/C Name: | | | Number | of A/C Units: | | |
| Model Number: | | | BTUs: | | | |
| Forced Air Furnace | | Incinerator | | Air Handling Uni | t | I |
| Unit Heater Boiler | | Boiler | | Heat Pump | | |
| Gas/Oil Conversion | | Coil Unit | | Air Cleaner | | |
| Space Heater | | Window A/C unit | | Kitchen Exhaust Hood/ Ansul System | | |
| Gravity Furnace Split System A/C | | | Hazardous Exhaust System | | | |
| Solid Fuel Appliance Elevator | | Elevator | | Other: | | |
| If altering existing system explain: | ı, | | | | | |

| PLUMBING | | | | |
|---|--|-----------------------------------|--|--|
| Type of Work (Check one): Installing New Equipment Altering Existing System Both | Water Meter sizeinches Water Service sizeinches | Will there be Underslab Plumbing? | | |
| Tubs/Shower Stalls | Drinking Fountains | Back Flow Preventers | | |
| Lavatories | Floor Drains | Water Pumps | | |
| Toilets | Water Heaters | Sewers | | |
| Urinals | Water Softeners | Gas Piping | | |
| Sinks | Sewage Ejectors | Swimming Pools | | |
| Laundry Tubs | Sump Pumps | Standpipes | | |
| Dishwashers | Grease Traps | Fire Sprinklers | | |
| Boilers | Bidets | Lawn Sprinklers | | |
| Hose Bibs | Other: | | | |

If altering existing plumbing system, explain:

If you are applying for a swimming pool permit, please note: No swimming pool in Warwick Township shall be filled from a public water system under the jurisdiction of the Warwick Township Water and Sewer Authority without written permission of the Authority.

| ELECTRICAL | | | | |
|---------------------------|---------------------|-------------------------|---|-----|
| Type of Work (check one): | Wire Type: | # of Hardwired Motors: | Electrical Service: Amps Check one: New Upgrade | |
| Installing New Equipment | Size: | Electrical Devices: | | |
| Altering Existing System | Circuit Load: | # of HP or KW: | | |
| 🗌 Both | | | | |
| Pool Bonding: Yes No | | | | |
| Switching Outlets | Bonding, Pool/Vault | | Size & KW | Qty |
| Lighting Outlets | Service/Feeders | Motors | | |
| Receptacle Outlets | HVAC Equipment | Generators | | |
| Range/Oven | Switching Devices | Compressors | | |
| Dryer, Electric | Transformers | Solar Panels | | |
| Water Heater, Electric | Alarm Devices | If altering existing sy | stem, explain: | |
| Heat Detectors | Annunciator Panel | | | |
| Smoke Detectors | Other: | | | |

To be Completed by Township Staff

| | Permit Sub | mission Checkli | st | |
|---|--|-----------------|-------------------|---|
| Permit Deposit? 2 copies of manufacturer' Is the application signed? Green Building Discount F TMP #: | s specifications/building plans form (optional) | | Yes Yes Yes |] No] No] No] No |
| Is the property in the Corr Is the property in any of t UCC Construction Type: _ | he Floodplain Districts? | Dup: | YES YES |] NO] NO (If yes, floodplain permit required) |
| Reviewers | Signature | Date | | Status |
| Building Code Official | | | Approved | Denied |
| Fire Marshal | | | Approved | Denied |
| Public Works | | | Approved | Denied |
| Engineer | | | Approved | Denied |
| Water & Sewer | | | Approved | Denied |
| Board of Health | | | Approved | Denied |
| Other | | | Approved | Denied |
| | | | | |

Reason for denial: ______

Fees

| | Other | \$ |
|-----------------|-------------|--------|
| Building | \$ UCC | \$4.50 |
| Engineer review | \$ TOTAL | \$ |