



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

Date Rec'd: _____

Check #/Credit Card: _____

Deposit Amount: _____

Received by: _____

ZONING PERMIT APPLICATION

Permit #: _____

Site/Contact Information

Site Address: _____			Primary Contact Person (check one)
Property Owner	Name	_____	
	Address	_____	
	Phone	Email	
Applicant	Name	_____	□
	Address	_____	
	Phone	Email	
Contractor	Name	PA Contractor's #	□
	Address	_____	
	Phone	Email	

Project Type

- | | | |
|---|---|--|
| <input type="checkbox"/> New Construction | <input type="checkbox"/> Outdoor Fireplace/Fire Pit | <input type="checkbox"/> Tree Removal |
| <input type="checkbox"/> Sign: <input type="checkbox"/> Permanent OR <input type="checkbox"/> Temporary | <input type="checkbox"/> Driveway Resurface/Enlargement | <input type="checkbox"/> Fence/Wall |
| <input type="checkbox"/> Addition/Attached Garage | <input type="checkbox"/> Uncovered Deck/Patio | <input type="checkbox"/> Pool |
| <input type="checkbox"/> Shed/Detached Garage | <input type="checkbox"/> Covered Deck/Patio | <input type="checkbox"/> Construction Trailer |
| <input type="checkbox"/> Alternative Energy (Solar, Wind, Outdoor Furnace) | <input type="checkbox"/> Sidewalk/Walkway | <input type="checkbox"/> Temp. Storage Unit/Dumpster |
| <input type="checkbox"/> Hot Tub | <input type="checkbox"/> Lawn Sprinkler System | <input type="checkbox"/> Temp. Sales Event |
| <input type="checkbox"/> Other: | | |

Project Details

Total Cost of Improvements: \$ _____ | Residential or Commercial

Square Footage of Proposed Improvement: _____ s/f | Height of Proposed Structure _____ ft

Brief Description of Project: _____

<p>Check the line below indicating that the following has been submitted:</p> <p>___ Two (2) copies of site plan</p> <p>___ \$50.00 permit deposit (\$25.00 deposit if permit fee is under \$50.00, see fee schedule)</p>
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By signing this application, the applicant is certifying that he/she is empowered by the owner of the property to make an application on his/her behalf. I/we grant permission to any municipal representative 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.

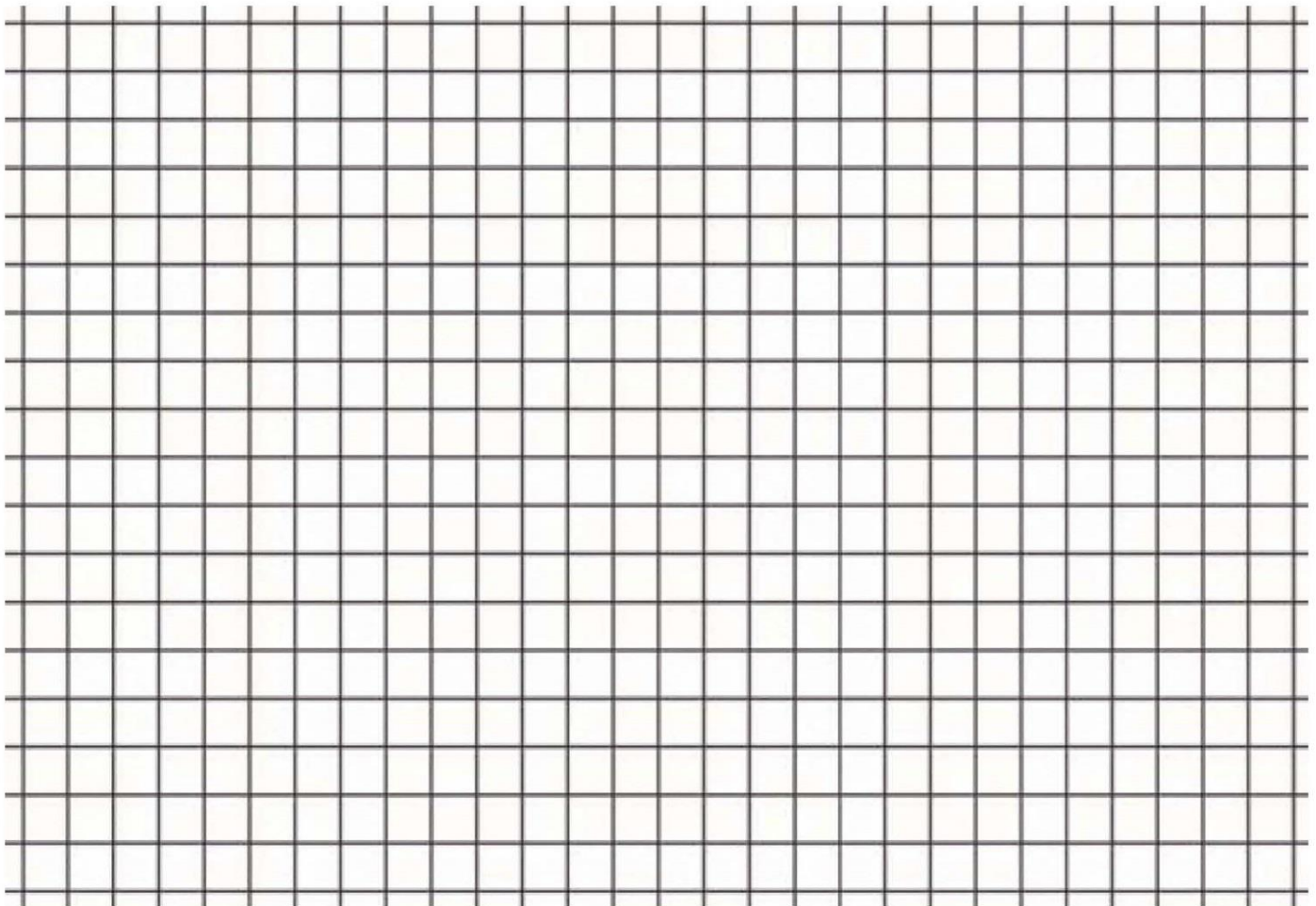
SITE INFORMATION

Water Service: Public Private

Sewer Service: Public Private

SITE PLAN

Use the grid below only if the property does NOT have an as-built plan. As-built plans can be requested from the township administrative offices, if available.



Plot Plan Requirements

All of the following must be clearly illustrated and identified on the site plan:

- | | |
|--|--|
| <ol style="list-style-type: none"> 1. Show proposed structure(s) with setback distances to property lines (Front, Sides, and Rear) 2. Show all existing structures, including house driveways, walkways, patios, decks, sheds, pools, hot tubs, garages, etc. 3. Show buffer yards, easements, and deed restricted open space | <ol style="list-style-type: none"> 4. Identify all streets with property frontage
Note: Corner properties have two front yards 5. Show existing woods and proposed extent of clearing 6. Show locations of septic systems, wells and stormwater management facilities |
|--|--|

Impervious Surface Calculation Worksheet

Required for the following permits: Addition, Detached Garage, Deck, Covered/Enclosed Porch, Paver Patio, Pool, Shed, Pool, and other structure

Impervious Surface: A surface that does not absorb rain. All buildings, parking areas, driveways, roads, sidewalks, and any areas in concrete and asphalt shall be considered impervious surfaces within this definition. In addition, all other areas determined by the Township Engineer to be impervious within the meaning of this definition will also be classified as impervious surfaces. For purposes of this definition the surface water of a swimming pool shall be classified as impervious.

A. Lot Size (1 Acre = 43,560 square feet): _____ sq. ft.

EXISTING

B. House Footprint: _____ sq. ft.

C. Driveway(s)/Parking Lot(s): _____ sq. ft.

D. Walkway(s)/Sidewalk(s): _____ sq. ft.

E. Porch(es): _____ sq. ft.

F. Patio(s): _____ sq. ft.

G. Deck(s): _____ sq. ft.

H. Accessory Structure(s)/Garage(s)/Shed(s): _____ sq. ft.

I. Pool(s)/Spa(s): _____ sq. ft.

J. Miscellaneous/Other: _____ sq. ft.

L. Existing Impervious Surface Subtotal (add B through J): _____ sq. ft.

PROPOSED

M. Proposed Construction: _____ sq. ft.

N. Total Impervious Surface Post Construction (L + M): _____ sq. ft.

O. **Proposed Impervious Percentage** (N divided by A * 100): _____%

To be Completed by Township Staff

Maximum impervious permitted _____%

To be Completed by Township Staff

Permit Submission Checklist

Permit Deposit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2 copies of plot plan showing:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
a. existing and proposed construction	<input type="checkbox"/> Yes	<input type="checkbox"/> No
b. distance to property lines (front/rear/side)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the Impervious Surface Sheet completed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the application signed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
TMP #:	51— _____ - _____ - _____	

Zoning District (circle one):

RA	R1	R1a	R2	RR	RG	MF1	MF2	VC	VCII	C1	C2	C3	O	LI	H
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Zoning Use: _____

Is the property in the Corridor Overlay District?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Is the property in any of the Floodplain Districts?	<input type="checkbox"/> YES	<input type="checkbox"/> NO (if yes, floodplain permit required)
Are there any variances, easements or DROS which will affect this permit?	<input type="checkbox"/> YES	<input type="checkbox"/> NO

Reviewers	Signature	Date	Status
Zoning Officer			<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Public Works			<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Engineer			<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Water & Sewer			<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Board of Health			<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Other			<input type="checkbox"/> Approved <input type="checkbox"/> Denied

Reason for denial: _____

Fees

Zoning	\$	Other	\$
Public Works	\$		
Engineer review	\$	TOTAL	\$