Seven Valleys Borough Application for Building Permit and/or Zoning Permit

This application is for only Zoning & Uniform Construction Code Building Permit in Seven Valleys Borough ALL APPLICATIONS ARE TO BE SUBMITTED TO MUNICIPALITY

All applicable zoning deposit fees if required per municipality are required at the time of permit application submittal. In the event the project is canceled please notify the applicable Township or Borough. Applications for Commercial permits may take up to 30 Business days for approval. Fees shall be charged if reviews are started.

A signed copy of the septic permit must be attached to this application at the time of submission.

FILL IN ALL CONSTRUCTION CODE DISCIPLINE DESCRIPTIONS OF WORK BEING DONE THAT APPLIES.

Failure to submit the required items may result in Permit DENIAL

Must provide PDF and 3 sets of plans. Plans required to be stamped by a design professional.

TYPE OF WORK	Duilding Code Dropoged Work	
Zoning Proposed work Please check the type of work proposed.	Building Code Proposed Work Please check the type of work proposed.	
Commercial	Commercial	
□ New Construction □ Addition □ Alteration	□ New Construction □ Addition □ Alteration	
□ Tenant Fit-Out □ Demolition □ Roofing		
□ Repair/Replace □ Deck Over 30" Basement finish	□ Tenant Fit-Out □ Demolition □ Roofing □ Requir/Perlace □ Deals Over 20" Resement finish	
	□ Repair/Replace □ Deck Over 30" Basement finish	
□ Change use □ In Ground pool	□ Change use □ In Ground pool	
□ Roof mounted solar □ Ground mounted solar	□ Roof mounted solar □ Ground mounted solar	
□ Above Ground Pool □ Above ground pool with deck	□ Above Ground Pool □ Above ground pool with deck	
□ Facade Sign □ Monument sign □ Agriculture building	□ Facade Sign □ Monument sign	
Other Other		
Zoning Contact: Seven Valleys Borough Phone: 717 300*8033 Email: contact@sevenyalleysborough	Building Contact: Dependable Construction Code Services .com Phone: 717-759-5906 Email: Info@dccsinspectors.com	
	sponsibilities for this permit (if Certificate is not provided	
	Comp Coverage and listing the applicable municipality as	
the certificate holder (\$1,000,000.	comp coverage and usung the applicable municipality as	
Estimated Cost of Construction (Required)		
Site Description		
	Depth Height	
Drawing provided Y/N		
	t. Side(Distance to the property line to new structures	
Total Lot area:Acres/Sq. Ft.	(2 issumed to the property lime to hell structure)	
Impervious coverage proposed: Sq.	Ft	
Applicant's Information		
Applicant's Name (Contact Person)	Company Name	
Applicant's Address		
Phone Number E-Mai	il Address	
Project Information		
Property Owner's Name		
Property Owner's Mailing Address Project Address		
Parcel ID Number		
Phone Number E-Mai		
	etion Permit Section	
Description of the proposed work to be performed:	tion I crimit section	
Description of the proposed work to be performed.		

Building Contractor Information Contractor Name _____ License # _____ Contractor Address _____ Contractor Phone Number _____

Contractor Address		
Contractor Phone Number		
	Electrical Permit Section	
Phase Power Company addition Pool Electric Electric Description of the proposed work	orary Electric Service Type Service:undergroundoverhead overhead New Home _ Addition Adding to Existing Circuit _ New circ	rcuits for
	Electrician Information	
Contractor Name	License #	
Contractor Phone Number		
Contractor Frione (various)		
Description of the proposed work	Plumbing Permit Section to be performed:	
	to be performed.	
Type of Fixtures and Number of IWasher Bathtub I Water Closet Water H Other	Bidet Dishwasher Laundry Tray Service Sink Sink feater	Shower
	Plumbing Contractor Information	
Contractor Name	License #	
Contractor Phone Number		
	HVAC / Mechanical Permit Section	
Description of the proposed work		
	to of periodical	
Unit Location:		
· ·	eplace Existing Unit New Fuel Type Other	
	tric Boiler Forced Air Steam Other	
	HVAC / Mechanical Contractor Information	
Contractor Name	License #	
Contractor Phone Number		

Fire Alarm / Fire Protection Permit Section

<u>Application For:</u> □ Fire Alarm □ Fire Protection □ Sprinkler System	
Description of the proposed work to be performed:	
Local Alarm Notification or Off-Site Alarm Monitoring:	
Installation of Fire Pump: □ Yes □ No	
Fire Alarm / Fire Protection Contractor Information	
Contractor Name License #	
Contractor Address	
Contractor Phone Number	
By signing this Application, I certify that the Application and all accompanying documentation are true and correct. This Application is being 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 hereby authorize the designated Seven Valleys Borough official investigate, inspect, and examine the property set forth herein, including land and structures, to determine compliance with the Seven Valleys Borough Zoning Ordinance and to determine the accuracy of the statements contained herein. The issuance of a Zoning Permit is based upon a stated and representations made in this application. A Zoning Permit may be revoked if use and/or structure for which it has been issued violated applicable Township, County, State or Federal law or regulation, including but not limited to the Seven Valleys Borough Zoning Ordinance. The Permit may also be revoked if it has been issued in error or if issuance was based upon any misrepresentations or errors contained in the Apple or otherwise made by the property owner.	he al to the facts te any This
The Property Owner bears all responsibility for ensuring compliance with all applicable Township, County, State, and Federal laws and regular Owner assumes all responsibility for the establishment of official property lines, right of way lines, easements, and property corners prior to dand construction. Approval can be revoked in the future if it is determined that information provided of these facts was misrepresented. Omiss any required information constitutes misrepresentation, and subsequently may result in the revocation of any approvals granted.	esign
I am aware that I cannot commence excavation or construction until a Zoning Permit has been issued by the Seven Valleys Borough Codes Enforcement Officer. I am aware that I cannot use the property or change the use of the property herein until I have applied for and received a Permit for such proposed use. I am aware that prior to the occupancy or use of the property for which this Zoning Permit Application has been must apply, in writing, for a Certificate of Use and Occupancy. I am aware that the Application for a Certificate of Use and Occupancy must lat least fourteen (14) days prior to the date upon which I wish to commence use and occupancy of the property. I understand that moving persolutions belongings into the property constitutes a use of the property and if I move such personal belongings into the property, I understand that I am violating the Seven Valleys Borough Zoning Ordinance and the terms of this Zoning Permit.	n made I pe made
PERMIT MUST BE APPROVED, PERMIT ISSUED, AND POSTED ON THE JOB SITE PRIOR TO BEGINNING WO	<mark>)RK!</mark>
Signature of Applicant Date	

As the owner of the parcel. I accept all insurance responsibilities for this permit (if Certificate not provided).[1] As the owner of the parcel or authorized agent. By signing below I am verifying all that information. to the best of my knowledge, is accurate. The property owner is responsible for procuring all other necessary approvals such as HOA approval. PennDOT HOP permits. Sewer & Water permits, etc

SITE PLAN (Required)

Must Include:

- PROPERTY LINES
- EXISTING STRUCTURE(S) ON PROPERTY
- (IF APPLICABLE) LOCATION OF SEPTIC SYSTEM
- LOCATION OF PROPOSED STRUCTURE(S)
- DISTANCE LABELED FROM PROPERTY LINES TO PROPOSED STRUCTURE(S)
- DIMENSIONS OF PROPOSED STRUCTURE(S)
- IF STRUCTURE IS A FENCE, THE HEIGHT MUST BE LABELED

ANY MISSING INFORMATION WILL RESULT IN THE RETURN OF THE APPLICATION

