LANCASTER 4340 OREGON PIKE
EPHRATA, PA 17522
T:717-859-3350 F:717-859-3363

116 HELLAM STREET WRIGHTSVILLE, PA 17368 T:717-755-9120 F:717-755-9135

Application for Commercial Building Permit and Plans Examination

Please note that the following are required to be submitted with this application:

Three (3) Sets of Site Plans
Three (3) Complete Sets of Stamped & Signed Construction Drawings
Three (3) Sets of Specifications

Property Information											
Project Address			City					Zip			
Owner's Name			Phone		Fax		Email				
Owner's Address			City			St			ate Zip		
Scope of Pro	ject										
Description of	Work:										
Cost of Construction			Square F	eet	Stories Above Grade			de :	e Stories Below Grade		
Check ALL Th	at Apply:										
☐ New Building			Addition			ons	☐ Exterior Alterations				
☐ Change in Use			Accessibility		pancy	☐ Fire Sprinkler System					
☐ HVAC			Plumbing			☐ Fire Alarm System					
☐ Sign			Demolition	ı 🗆	Founda	ation Only	y	☐ Roo	f		
Construction T	ype:	IA	IIA	IIIA	VA	IV	IB	IIB	IIIB	VB	
Use Group:	A-1	A-2	A-3	A-4	A-5	В	E	F-1	F-2		
	H-1	H-2	H-3	H-4	H-5	I-1	I-2	I-3	I-4		
	M	R-1 □	R-2 □	R-3 □	R-4 □	S-1	S-2	U			
			F	OR OFF	ICIAL 1	USE ON	LY_				

Please note the following regarding Phased Projects and Deferred Submittals:

- · Work can only be done on reviewed and approved construction documents.
- · Construction documents for total building approval must be submitted and reviewed before any additional construction can occur.
- This limited approval does not guarantee that a permit will be issued for the entirety of the construction project.
 - · The Applicant assumes all risk.

		. (If checked, please indic ch in the space provided b		mber of phases an	d brief
☐ I am requesting a Def estimated submittal date		al. (Please check the discrevided below.)	iplines you wis	h to defer and indi	cate their
☐ Architectural	☐ Struct	tural	ility 🗖	Energy/Insulation	
☐ Electrical	☐ Mech	nanical 🗖 Plumbing	g \square	Fire Sprinkler Sys	tem
☐ Fire Alarm Systen	n 🗖 Wood	d Roof Trusses (Stamped a	and Signed)		
Design Professional (T	his Section m	nust be fully completed p	orior to permit	processing.)	
Company Name		Phone		Fax	
Address		City		State Z	Zip
Name		Phone			
Pennsylvania License Numl	ber	Email			

Contractor Information		(If not needed for	project, write N/A)
General Contractor:			
Company Name	Phone	·	Fax
Address	City	State	Zip
Contact	Email		Cell
Electrical Contractor:			
Company Name	Phone		Fax
Address	City	State	Zip
Contact	Email		Cell
HVAC Contractor:			
Company Name	Phone	;	Fax
Address	City	State	Zip
Contact	Email		Cell
Plumbing Contractor:			
Company Name	Phone	· · · · · · · · · · · · · · · · · · ·	Fax
Address	City	State	Zip
Contact	Email		Cell
Fire Alarm Contractor:			
Company Name	Phone	· · · · · · · · · · · · · · · · · · ·	Fax
Address	City	State	Zip
Contact	Email		Cell
Fire Sprinkler Contractor:			
Company Name	Phone	· · · · · · · · · · · · · · · · · · ·	Fax
Address	City	State	Zip
Contact	Email		Cell

As the owner, lessee, design professional employed in connection with the proposed work or agents thereof, I certify that:

- All information provided on and with this application is true and correct and that the
 work will be completed in accordance with the "approved" construction documents and
 PA Act 45 (Uniform Construction Code) and any additional approved building code
 requirements adopted by the Municipality;
- I understand that this permit is valid for one (1) year after its issuance by the Municipality;
- I understand that this permit shall become invalid unless the authorized construction work begins within 180 days of this permit's issuance or if the authorized construction work is stopped for a period longer than 180 days;
- I understand that no work may be started, or continued, unless a permit is issued by, and the fees paid to, the Municipality;
- I understand that, once issued, a copy of this permit will remain on the work site until the completion of this project;
- I understand that a Building Permit Placard shall be placed on the property visible from the street;
- I am responsible for locating all property lines, setback lines, casements, rights-of-way, flood areas, etc.;
- I understand that the issuance of a permit and approval of construction documents shall not be construed as authority to violate, cancel or set aside any provisions of the codes or ordinances of the Municipality or any other governing body;
- I understand all applicable codes, ordinances and regulations;
- Any changes to the approved documents will be submitted in writing and these changes will not occur until they have been reviewed and approved;
- I understand that Code Administrators, Inc., or their authorized representative, shall have the authority to enter areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit;
- I understand that I am required to apply for any required Zoning Permits;
- I understand that I am responsible for any plan review fees or any additional inspections
 fees, which may be required during construction, that were not identified during the
 initial permit approval; and,
- I understand that all fees must be paid in full before a Certificate of Use and Occupancy
 can be issued. Should I decide to cancel the project, I agree that I am responsible for any
 fees incurred in the reviewing process.

Phone	Email
City	State Zip
	 Date