



1130 N. Bethlehem Pike
Spring House, PA 19477
215.646.5302 (p) 215.646.3357 (f)

APPLICATION FOR PERMIT

(All below relevant fields must be filled out prior to submission)

Parcel Information (must be filled out for all work):

Address of work to be performed: _____

Property Type: ☐ Residential ☐ Commercial Zoning District: _____

Parcel Owner Name: _____

(copy of signed contract must be included with submission)

Parcel Owner Address: (if different than address listed above)

_____ Parcel Owner Phone: _____

Parcel Owner Email: _____

Contractor Information (current COI is required with each submission):

Business Name: _____ Contractor Name: _____

Business Address: _____

Business Phone: _____ Cell Phone: _____

Email: _____

HIC PA License #(residential work): PA _____ LGT Contractor License # (commercial work): C- _____

Architect/Engineer information:

Name: _____

Phone: _____ Email: _____

Zoning Information: (a site plan showing existing setbacks to be included with submission)

Zoning District: _____ ZHB Approval Received: Yes () N/A () (copy of Decision & Order to be attached)

% of Current Impervious Coverage _____ % of Proposed Impervious Coverage: _____

Lot Frontage (width): _____ Lot Depth: _____

Current Front Yard Setback: _____ Current Rear Yard Setback: _____ Current Side Yard Setback: _____

Proposed Front Yard Setback: _____ Proposed Rear Yard Setback: _____ Proposed Side Yard Setback: _____

Height of Proposed Building: _____

Building Permit Information:

Type of construction (check off all that apply):

☐ New Construction (new homes require separate breakdown sheet of sq. footage of each level/patio/deck/garage/attic or crawl spaces)

☐ Pre-Submission Plan Review (Commercial) ☐ Pre-Submission Plan Review (Single Family Residential)

☐ Kitchen Alteration

☐ Oil Tank

☐ Reroof Commercial

☐ Reroof Residential (required only if sheathing is being replaced)

☐ Alteration/Addition

☐ Sheds (over 200 sf)

☐ Antenna/Cell Tower

☐ Solar Panels

☐ Accessory Structures (decks, garages, porches, pavilions etc..)

☐ Bathroom Remodel

☐ Swimming Pools, Tennis/Basketball Courts/Other Recreational Uses

☐ Demolition (SEE ATTACHED REQUIREMENT LIST)

☐ Storage Tank

☐ Gas Fireplace

☐ Stucco/Siding

☐ Generator (see generator requirement sheet)

☐ Tenant Fit-Out

☐ Interior Renovation (attach worklist)

☐ Tents (open sides > 700 sf / closed sides > 400 sf)

Sq. footage of work to be performed: _____ Cost of work: \$ _____

Type of Sewage: ☐ Public/Private ☐ Individual (septic tank etc.) Type of Water Supply: ☐ Public/Private ☐ Well

Automatic Fire Sprinkler System Installed ☐ Yes ☐ No Fire Alarm ☐ Yes ☐ No

Proposed Number of Employees: _____ Proposed Parking Spaces: _____

Description of work: _____

Approved By BCO: _____ Date: _____

Zoning Officer's Signature: _____ Date: _____ LGT PERMIT # _____