

CASTANEA TOWNSHIP
 CODE ENFORCEMENT
 347 Nittany Road
 Castanea, PA 17745
 Phone 570-748-9070

PERMIT NO. _____

Department of Labor and Industry No. _____

APPLICATION FOR PLAN EXAMINATION AND ZONING PERMIT

IMPORTANT – Applicant to complete all items in sections: I, II, III, IV, and V

I. LOCATION OF BUILDING	<input type="checkbox"/> _____	<input type="checkbox"/> Township	<input type="checkbox"/> _____	
	Name _____	Date _____		
	Address _____	Lot _____		
	Phone _____			

II. TYPE OF IMPROVEMENT - All applicants complete, Parts A-D

<p>A. TYPE OF IMPROVEMENT</p> <p>1 <input type="checkbox"/> New building</p> <p>2 <input type="checkbox"/> Addition</p> <p>3 <input type="checkbox"/> Remodeling, alterations</p> <p>4 <input type="checkbox"/> Repair, replacement</p> <p>5 <input type="checkbox"/> Wrecking</p> <p>6 <input type="checkbox"/> Moving (relocation)</p> <p>7 <input type="checkbox"/> Foundation only</p> <p>8 <input type="checkbox"/> Other – Specify on Page II _____</p>	<p>B. PROPOSED USE</p> <p>A <input type="checkbox"/> High hazard building</p> <p>B <input type="checkbox"/> Storage building</p> <p>C <input type="checkbox"/> Mercantile building</p> <p>D <input type="checkbox"/> Industrial building</p> <p>E <input type="checkbox"/> Business building</p> <p>F <input type="checkbox"/> Assemble building</p> <p>G <input type="checkbox"/> Garage, carport</p> <p>H <input type="checkbox"/> Institutional building</p> <p>I <input type="checkbox"/> Residential building</p> <p>M <input type="checkbox"/> Miscellaneous – use Specify on Page II _____</p>
<p>C. OWNERSHIP</p> <p>9 <input type="checkbox"/> Private (individual, corporation, nonprofit institution, etc.)</p> <p>10 <input type="checkbox"/> Public (Federal, State, or local government)</p>	
<p>D. RESIDENTIAL</p> <p>11 <input type="checkbox"/> One family</p> <p>12 <input type="checkbox"/> Two or more families Enter number of units _____</p> <p>13 <input type="checkbox"/> Transient hotel, motel, or dormitory – Enter number of units _____</p> <p>14 <input type="checkbox"/> Other – Specify on Page II _____</p>	<p>Nonresidential – Describe in detail proposed use of building _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>

III. SELECTED CHARACTERISTICS OF BUILDING - For new buildings and additions, complete Parts E-L

<p>E. PRINCIPAL TYPE OF FRAME</p> <p>15 <input type="checkbox"/> Masonry (wall bearing)</p> <p>16 <input type="checkbox"/> Wood frame</p> <p>17 <input type="checkbox"/> Structural steel</p> <p>18 <input type="checkbox"/> Reinforced concrete</p> <p>19 <input type="checkbox"/> Other – Specify _____</p>	<p>G. TYPE OF SEWAGE DISPOSAL</p> <p>25 <input type="checkbox"/> Public or private company</p> <p>26 <input type="checkbox"/> Private (septic tank, etc.)</p>	<p>J. DIMENSIONS</p> <p>31 Number of stories.....</p> <p>32 Total square feet of floor area, all floors, based on exterior dimensions</p> <p>Total land area, sq. ft</p>
	<p>H. TYPE OF WATER SUPPLY</p> <p>27 <input type="checkbox"/> Public or private company</p> <p>28 <input type="checkbox"/> Private (well, cistern)</p>	
<p>F. PRINCIPAL TYPE OF HEATING FUEL</p> <p>20 <input type="checkbox"/> Gas</p> <p>21 <input type="checkbox"/> Oil</p> <p>22 <input type="checkbox"/> Electricity</p> <p>23 <input type="checkbox"/> Coal</p> <p>24 <input type="checkbox"/> Other – Specify _____</p>	<p>I. TYPE OF MECHANICAL</p> <p>Will there be central air conditioning?</p> <p>29 <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Will there be an elevator?</p> <p>30 <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>K. RESIDENTIAL BUILDINGS ONLY</p> <p>33 Number of bedrooms _____</p> <p>34 Number of bathrooms _____</p> <p>Full _____ Partial _____</p>
		<p>L. MISCELLANEOUS</p> <p>_____</p> <p>_____</p>

IV. IDENTIFICATION			
Name	Mailing address – Number, street, city, and State	ZIP code	Tel. No.
1. Owner			
2. Contractor			
3. Architect			
The owner of this building and the undersigned agree to conform to all applicable laws of this jurisdiction.			
Signature of applicant		Address	Application date

VI. ESTIMATED COST BY APPLICANT				EST. COST BY CODE OFFICE				office use only
PROJECT TOTAL								

DO NOT WRITE BELOW THIS LINE

VI. VALIDATION	
Building	Permit number _____
Building	Permit Issued _____
Building	Permit Fee \$ _____
Approved by:	

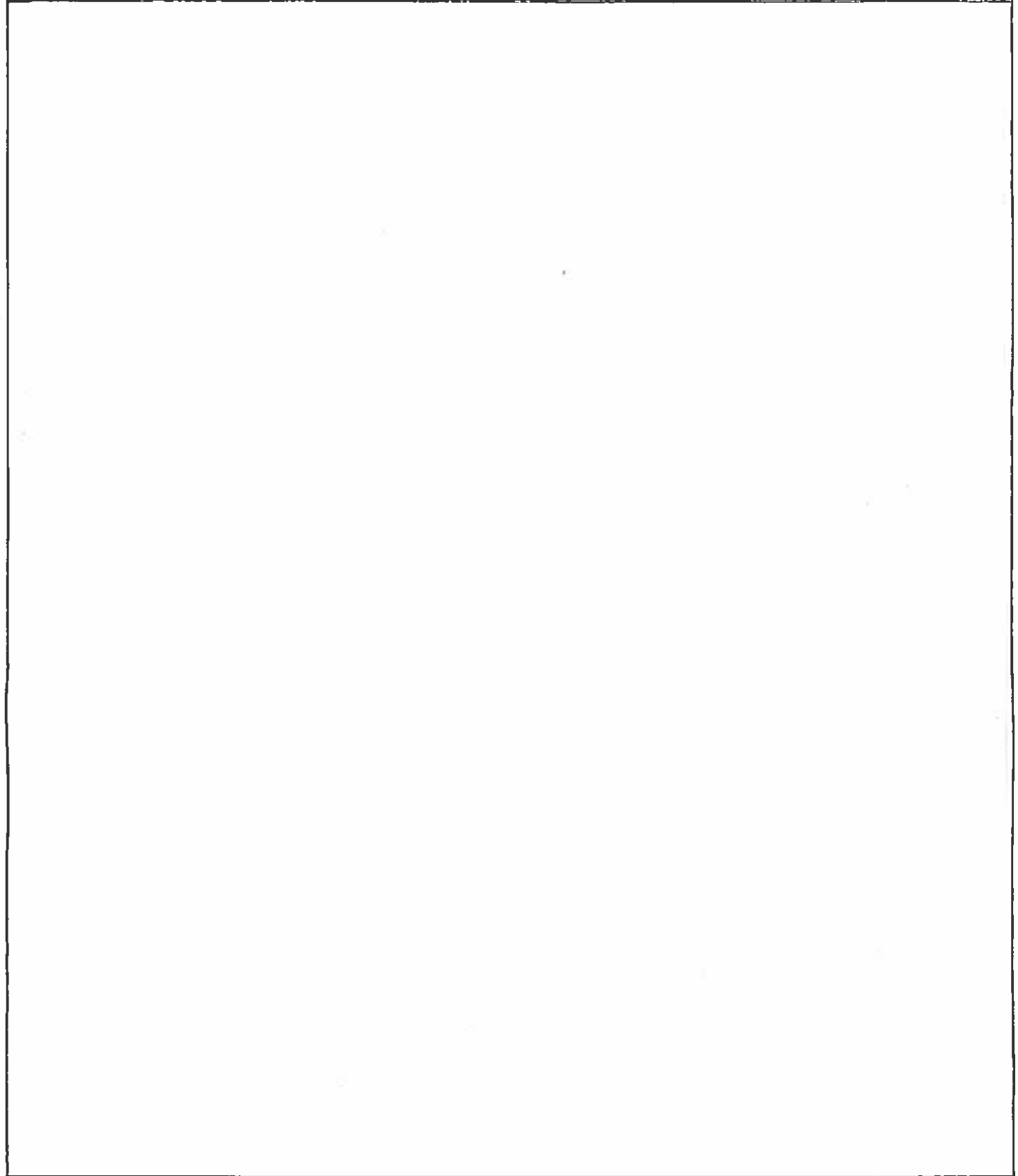
TITLE	

MUST BE APPROVED BY ZONING OFFICER

APPROVED BY

Zoning Officer _____

VII. SITE PLAN -- DIMENSION TO BE FILLED BY APPLICANT.



FRONT PROPERTY LINE

NOTE: All dimensions are to be shown neatly in ink. Kindly show in outline location of garage, outbuildings, etc., as well as location of proposed construction and driveway exits.