

PERMIT # _____

APPLICATION DATE: _____

TOWNSHIP OF ANTIS
APPLICATION FOR CONSTRUCTION
909 North Second Street, Bellwood, PA 16617

Application Requirements

NEW HOMES - Water, Sewer or Septic Permits, and Two Sets of Plans
 - Driveway, Subdivide, Flood, Wet Land, Workers Comp. Ins.

NEW COMMERCIAL BUILDING - Water and Sewer, Two Sets of Plans & Land Development Approvals

BUILDING ADDITIONS - Two Sets of Plans & may need Water and/or Sewer Permits

A. Identification

1. Applicant
Name _____
Address _____
Phone No. _____

2. Owner
Name _____
Address _____
Phone No. _____

3. Contractor
Name _____
Address _____
Phone No. _____

Declared Cost \$ _____

Describe Work:

Indicate Use:

B. Type of Work

- 1. _____ New Building
- 2. _____ Addition
- 3. _____ Alterations
- 4. _____ Repair/Replace
- 5. _____ Demolition
- 6. _____ Relocation
- 7. _____ Foundation only
- 8. _____ Change of use
- 9. _____ Plumbing
- 10. _____ Mechanical
- 11. _____ Electrical

C. Location of Proposed Work or Improvement

D. Property Code No.

E. Site Location

F. Type of Application

- _____ Commercial
- _____ Residential

G. TYPE OF SEWAGE DISPOSAL

_____ Public Sewer or _____ Septic

Bellwood / NBCRSA

Permit # _____

Natural Gas
Electric
Telephone
Cable

YES NO

TYPE OF WATER SUPPLY

_____ Public Water or _____ Well

Altoona / Bellwood / Bellmeade

_____ Highway Occupancy Permit
_____ Notified PA One Call

_____ 7 digit Verification Number

H. FLOODPLAIN

Lowest Flood Level: _____

Is the site located within an identified flood hazard area? (Check one) YES NO

Will any portion of the flood hazard area be developed? (Check one) YES NO

Owner/Agent shall verify that any proposed construction and/or development activity complies with the requirements of the National Flood Insurance Program and the Pennsylvania Flood Plain Management Act (Act 166-1978), specifically Section 60.3

In the event the Building is in a Flood-Prone Area, there will be an additional fee of \$150.00 for reviewing the Plans and Inspection by the Township’s Engineer.

I. AFFIDAVIT

I hereby acknowledge there are no Easements or Underground Utilities under the proposed New Structure, and that all statements above are true, and to the best of my knowledge. I hereby certify that I am the owner in fee or the authorized agent of the owner in fee of the Property upon which the work will be performed. I certify that all information on this application is correct and 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 assume the responsibility of locating all property lines, setback lines, easements, right-of way, flood areas, etc. 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 the applicable codes, ordinances and regulations.

Application for a permit shall be made by the owner or lessee of the building or structure, or agent of either, or by the registered design professional employed in connection with the proposed work.

I certify that the code administrator or the code administrator’s authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

Signature of Owner or Authorized Agent

Date: _____

J. SITE PLAN

FILLED IN BY APPLICANT – SHOW **ALL** EXISTING BUILDINGS ON THE PROPERTY IN ADDITION TO THE PROPOSED WORK

ALL NEW STRUCTURES MUST BE STAKED OUT AND INSPECTED BY THE TOWNSHIP **BEFORE** THE A CONSTRUCTION PERMIT CAN BE ISSUED.

DIRECTIONS TO SITE: _____

- THIS SECTION FOR OFFICIE USE ONLY -

K. VALIDATION

Building Permit No _____
Date Permit Issued _____
Final Inspection Date _____

MIDA Fee _____
Township Fee _____
Governor's Fee _____
Occ. Fees _____
Driveway Fee _____
TOTAL FEE _____

Received By _____

Date: _____

OEO Approval _____

BCO Approval _____

Permit Type:

Assessment _____ Building _____ Electrical _____

Official Filing Date:

WORKERS' COMPENSATION INSURANCE COVERAGE INFORMATION

A. THE APPLICANT IS

A contractor within the meaning of the Pennsylvania Workers' Compensation Law
_____ Yes _____ No

If the answer is "yes," complete Sections B and C below as appropriate

B. INSURANCE INFORMATION

Name of Applicant _____

Federal or State Employer Identification No. _____

Applicant is a qualified self-insurer for workers' compensation.
_____ Certificate attached.

Name of Workers' Compensation Insurer _____

Workers' Compensation Insurance Policy No. _____
_____ Certificate attached.

Policy Expiration Date _____

C. EXEMPTION

Complete Section C if the applicant is a contractor claiming exemption from providing workers' compensation insurance.

The undersigned swears or affirms that he/she is not required to provide workers' compensation insurance under the provisions of Pennsylvania Workers' Compensation Law for one of the following reasons, as indicated:

_____ Contractor with no employees. Contractor prohibited by law from employing any individual to perform work pursuant to this building permit unless contractor provides proof of Insurance to the Township.

_____ Religious exemption under the Workers' Compensation Law.

Subscribed and sworn to before me this
_____ day of _____ 20 _____

(Signature of Notary Public)

My commission expires: _____

(SEAL)

(Signature of Applicant)

Address _____

County of _____

Municipality of _____