

WESTTOWN TOWNSHIP  
1039 Wilmington Pike  
P.O. Box 79  
Westtown, PA. 19395

Phone: 610.692.1930  
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Date Received \_\_\_\_\_

### COMMERCIAL BUILDING PERMIT APPLICATION

**All information must be printed legibly or typed on this application in order to receive a permit**  
**ANY ENGINEERING PLAN REVIEW FEES WILL BE BILLED TO THE APPLICANT UPON RECEIPT OF FINAL INVOICES**

-----OFFICIAL USE ONLY-----

Zoning District \_\_\_\_\_ Parcel Number \_\_\_\_\_ Permit Number \_\_\_\_\_ Permit Fee \_\_\_\_\_  
Address \_\_\_\_\_, West Chester, PA 19382

**Applicant/Contractor Information**

PERMIT TYPE:  New  Addition  Alteration

Property Owner \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Contractor**

Company Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Owners Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Architect/Other \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

For all commercial building permits, the drawings must be prepared by a PA registered design professional (Architect or Structural Engineer) and all drawings must be **SIGNED, SEALED AND DATED**. **Unsigned, unsealed and undated drawings will be returned.**

### NOTICE

**All work performed in conjunction with this permit shall be in conformance with the 2006 INTERNATIONAL BLDG. CODE.**  
**ALL ACCESSIBILITY ISSUES ACCORDING TO ANSI 117.1-2003 WILL BE REQUIRED AND ENFORCED.**

The applicant:  Owner  Contractor  Architect hereby makes application to  Alter  Erect the following:

Description \_\_\_\_\_

Use Group Classification \_\_\_\_ Construction Type \_\_\_\_ (As indicated on Signed and Sealed Architectural Drawings)

On property located at \_\_\_\_\_

Lot Number \_\_\_\_\_ Lot Area \_\_\_\_\_ Frontage \_\_\_\_\_ Depth \_\_\_\_\_

Set Back from right-of way \_\_\_\_\_ Side Yard – Left \_\_\_\_\_ Right \_\_\_\_\_ Rear Yard \_\_\_\_\_

Floor area \_\_\_\_\_ sq.ft. Height \_\_\_\_\_ Width \_\_\_\_\_ Depth \_\_\_\_\_

**Sewer Disposal**  Public  \*On site – CCHD permit number \_\_\_\_\_ Date \_\_\_\_\_

**Water supply**  Public  \*On site – CCHD well permit number \_\_\_\_\_ Date \_\_\_\_\_

\* Pennsylvania Highway Department Permit Number (if required) \_\_\_\_\_

\* Chester County Health Department Permit Number (required for all food storage, sales, or preparation uses) \_\_\_\_\_

\* A copy of this permit must be provided and attached to this Building Permit Application.

No. of floors \_\_\_\_\_ No. of Baths \_\_\_\_\_ Total Sq. Ft (ALL FLOORS) \_\_\_\_\_

Total Covered Parking Spaces \_\_\_\_\_ Total Exterior Parking Spaces \_\_\_\_\_ Total Handicapped Accessible Parking Spaces \_\_\_\_\_

**PLEASE COMPLETE THE OPPOSITE SIDE**

**Building Information (Continued)**

**Structural**

Footings \_\_\_\_\_ Depth \_\_\_\_\_

Foundation \_\_\_\_\_

	Span	Size	Spacing		Span	Size	Spacing
Girders				Interior Studs			
1 <sup>st</sup> Floor Joist				Roof Rafters			
2 <sup>nd</sup> Floor Joist				Bearing Walls			
Ceiling joist				Columns			
<b>Exterior studs</b>							

**Wall Coverings**

Exterior Walls \_\_\_\_\_ Interior Walls \_\_\_\_\_ Roof \_\_\_\_\_

**Mechanical**

Equipment	Flue Size
Heat source	
Heat source	

Type of HEAT SOURCE  Oil  Natural Gas  LP Gas  H.P.  Other \_\_\_\_\_

Type of water heater  Oil  Natural Gas  LP Gas  Electric  Other \_\_\_\_\_

**Plumbing**

Kitchen sinks \_\_\_ Dishwashers \_\_\_ Garbage disposals \_\_\_ Clothes washers \_\_\_ Laundry Tubs/standpipes \_\_\_\_\_

Lavatories \_\_\_ Water Closets \_\_\_ Bath tubs \_\_\_ Showers \_\_\_ Bidet \_\_\_ Others \_\_\_\_\_

**Electrical**

Main service \_\_\_ Amps Ranges \_\_\_ Heaters \_\_\_ Fixtures \_\_\_ Switches \_\_\_ Outlets \_\_\_ Other \_\_\_\_\_

**VALUATION: Contract Price \$ \_\_\_\_\_ Total cost of all items required to complete job.**

**If Owner acts as contractor the fair market value of this project will be estimated by the Building Code Official.**

I hereby acknowledge that I have read and understand this application and state that the above is correct and I agree to comply with all the provisions of the adopted Westtown Township Building Codes and Zoning Ordinances.

SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE OF OWNER \_\_\_\_\_ DATE \_\_\_\_\_

-----DO NOT WRITE BELOW THIS LINE-----

**PERMIT APPROVAL**

Building Code Official \_\_\_\_\_ Date \_\_\_\_\_

*Special stipulations OR variance OR special exceptions. SEE ATTACHED.*

**REQUIRED INSPECTIONS**

Site Inspection	Plan Review	Footer	Foundation	Waterproofing	Backfill	Framing	Fire Caulking	Insulation
Sanitary Sewer	Int. Plumbing	Rough Electric	Final Electric	Final-Building	C. of O.			

REVISED 2014-10

Revised 2014-10