

MANCHESTER TOWNSHIP
Application for RESIDENTIAL Building Permit and Plans Examination

CODE ADMINISTRATORS, INC. 1525 Oregon Pike Lancaster, PA 17601 Ph: (717) 755-9120 Fx: (717) 755-9135	MANCHESTER TOWNSHIP 3200 Farmtrail Road York, PA 17406 Ph: (717)764-4646 Fx: (717)767-1400
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APPLICANT must fill out pages 1, 2 & 3 for application to be considered complete along with **THREE (3)** sets of any required construction drawings

LOCATION OF PROJECT	Address _____ Proposed Use _____ Tax Map _____ Parcel # _____ Subdivision _____
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PROPERTY OWNER OF RECORD	Name of Owner _____ Address of Owner _____ City _____ Phone # of Owner _____ State _____ Zip Code _____ E-Mail: _____
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PROJECT INFO	<input type="checkbox"/> New Building <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Demolition <input type="checkbox"/> Relocation <input type="checkbox"/> Foundation Only <input type="checkbox"/> Change of Use <input type="checkbox"/> Plumbing <input type="checkbox"/> Mechanical <input type="checkbox"/> Electrical <input type="checkbox"/> Other Brief Description of Project _____ _____ Cost of Construction _____ Sq. Footage _____
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The applicant certifies 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. The property owner and applicant assumes the responsibility of locating all property lines, setback lines, easements, rights-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. The applicant certifies he/she understands 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 And Date REQUIRED	Applicant Printed Name _____ Applicant's Address _____ Phone # _____ Applicant Signature _____ Date _____ E-Mail: _____
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FOR OFFICIAL USE BELOW THIS LINE

Permit Number _____	Permit Fee: _____ x \$ _____ = _____ (362.411)
Date Issued _____	Review Fee: _____ x \$ _____ = _____ (362.412)
Permit Type _____	Inspections: _____ x \$ _____ = _____ (362.412)

UCC Applicable - YES NO (if yes add \$4.50 - Education/Program Training Fee (Act 13) = _____ (235.10)

Use Group _____	TOTAL FEE TO BE COLLECTED	
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Construction Plans Submitted _____

Building Code Official _____

PERMIT NUMBER: _____
 ADDRESS: _____

MANCHESTER TOWNSHIP

Residential Building Permit Application Page 2
(applicant)

Permit # _____

Contractor Information – may use additional sheets

General Contractor

General Contractor _____
Address _____
Phone _____ Fax _____ Mobile _____
E-Mail : _____

Framing Contractor

Framing Contractor _____ Contact # _____
Scope of Work _____

E-Mail: _____

Electrical Contractor

Electrical Contractor _____ Contact # _____
Scope of Work _____

E-Mail _____

Plumbing Contractor
(include a fixture count in scope of work)

Plumbing Contractor _____ Contact # _____
Scope of Work _____

E-Mail: _____ Twp Registration # _____

Heating Contractor

Heating Contractor _____ Contact # _____
Scope of Work _____

E-Mail: _____

Other Contractors

Contractor Name _____ Contact # _____
Scope of Work/Type of Work _____

E-Mail : _____

MANCHESTER TOWNSHIP
Residential Building Permit Application Page 3
(applicant)

Permit # _____

A SITE PLAN IS REQUIRED FOR ALL SUBMISSIONS

Site or Plot Plan (show ALL property lines, ALL existing and proposed structures, dimensions to all property lines, driveway accesses and all other details deemed required)

May supply a separate site plan sheet

Plan scale _____



MANCHESTER TOWNSHIP

Residential Building Permit Application Page 4
(Township use only)

Permit # _____

Zoning Review

Lot
Detail

Tax Map _____	Parcel # _____	Zoning District _____
Subdivision _____		Use _____
Front Yard _____	Side Yard _____	Rear Yard _____
Driveway _____		
ZHB Action/Decision _____	Date _____	
Floodplain Located Within Site _____ Yes _____ No _____ Study Done		
Historic Structure _Yes _No / Airport Hazard _Yes _No / Soil Erosion Plan __Yes __No		

Notes/
Conditions

NOTE ANY EASEMENTS _____

ARREARS/LEINS/JUDGEMENTS (per Act 90) ____ Yes ____ No _____

PROJECT DESCRIPTION: _____

STIPULATIONS _____

Contractors Insurance Info : Policy # _____ Company: _____ Expiration Date _____

Hwy. Occupancy Permit # _____ Issued _____ Twp. _____ PA DOT _____

Public Sewer Permit # _____ On-site Sewage Permit # _____ Issued _____

Storm Water Permit # _____ Issued _____

Zoning Officer Signature _____ Approval Date _____

PERMIT NUMBER: _____

ADDRESS: _____