

LOWER MERION TOWNSHIP

COMMERCIAL BUILDING PERMIT APPLICATION

DISTRICT # _____

75 East Lancaster Avenue, Ardmore, PA 19003-2376 610-645-6200 FAX 610-649-9598

LOCATION OF BUILDING	ADDRESS			
	Number	Street	Town	
	FLOOR	SUITE NO.	ZONING	
	TENANT	LOT	BLOCK	UNIT

CONSTRUCTION

02) <input type="checkbox"/> NEW MULT. FAMILY DWELLING	41) <input type="checkbox"/> RE-ROOF	61) <input type="checkbox"/> H.V.A.C. SYSTEM
03) <input type="checkbox"/> NEW BUSINESS BUILDING	43) <input type="checkbox"/> DUCT WORK ONLY	62) <input type="checkbox"/> A/C UNIT(S) ONLY
04) <input type="checkbox"/> NEW INSTITUTIONAL BUILDING	44) <input type="checkbox"/> INTERIOR PARTITIONS	63) <input type="checkbox"/> GAS HEATER
05) <input type="checkbox"/> NEW PUBLIC BUILDING	45) <input type="checkbox"/> FOUNDATIONS ONLY	64) <input type="checkbox"/> OIL HEATER
12) <input type="checkbox"/> ADDITION MULT. FAMILY DWELLING	46) <input type="checkbox"/> ELEVATOR	65) <input type="checkbox"/> HEAT PUMP
13) <input type="checkbox"/> ADDITION BUSINESS BUILDING	47) <input type="checkbox"/> SPRINKLER SYSTEM	66) <input type="checkbox"/> CHIMNEY REPAIR
14) <input type="checkbox"/> ADDITION INSTITUTIONAL BUILDING	49) <input type="checkbox"/> SPRINKLER REPAIR	67) <input type="checkbox"/> IMPRV. SURF. EXPANSION
15) <input type="checkbox"/> ADDITION PUBLIC BUILDING	52) <input type="checkbox"/> DEMOLITION BUILDING	74) <input type="checkbox"/> WIRELESS COMM. FAC.
22) <input type="checkbox"/> ALTERATION MULT. FAMILY DWELLING	53) <input type="checkbox"/> FIRE REPAIR	75) <input type="checkbox"/> SATELLITE ANTENNA
23) <input type="checkbox"/> ALTERATION BUSINESS BUILDING	54) <input type="checkbox"/> SWIMMING POOL	76) <input type="checkbox"/> TEMPORARY TENT
24) <input type="checkbox"/> ALTERATION INSTITUTIONAL BUILDING	55) <input type="checkbox"/> TANKS / PUMP	
25) <input type="checkbox"/> ALTERATION PUBLIC BUILDING	56) <input type="checkbox"/> TENNIS COURT	
32) <input type="checkbox"/> REPAIR MULT. FAMILY DWELLING	57) <input type="checkbox"/> SIGN / AWNING	
33) <input type="checkbox"/> REPAIR BUSINESS BUILDING	58) <input type="checkbox"/> BLDG. OTHER _____	
34) <input type="checkbox"/> REPAIR INSTITUTIONAL BUILDING		
35) <input type="checkbox"/> REPAIR PUBLIC BUILDING		

<p>OWNERSHIP</p> <p>81) <input type="checkbox"/> PRIVATE (IND., INST., CORP.)</p> <p>82) <input type="checkbox"/> PUBLIC (LOCAL, STATE, FED.)</p>	<p>COST</p> <p>98) COST OF CONST.</p> <p>ALARM</p> <p>ELECTRICAL</p> <p>PLUMBING</p> <p>SPRINKLER</p> <p>H.V.A.C.</p> <p>99) TOTAL COST</p>	<p>COST</p>	<p>CONTRACTOR'S NAME</p>
<p>PROPOSED USE OF PROPERTY</p> <p>92) <input type="checkbox"/> MULT. FAMILY DWELLING (#Units _____)</p> <p>93) <input type="checkbox"/> BUSINESS (Type) _____</p> <p>94) <input type="checkbox"/> INSTITUTIONAL BUILDING</p> <p>95) <input type="checkbox"/> OTHER (Type) _____</p> <p>96) <input type="checkbox"/> PUBLIC BUILDING</p>			

FOR NEW HOMES ONLY SELECTED CHARACTERISTICS OF BUILDING

<p>PRINCIPAL TYPE OF FRAME</p> <p><input type="checkbox"/> MASONRY (wall bearing)</p> <p><input type="checkbox"/> WOOD FRAME</p> <p><input type="checkbox"/> STRUCTURAL STEEL</p> <p><input type="checkbox"/> REINFORCED CONCRETE</p> <p><input type="checkbox"/> OTHER</p> <p style="padding-left: 20px;">Specify _____</p>	<p>TYPE OF SEWAGE DISPOSAL</p> <p><input type="checkbox"/> PUBLIC OR PRIVATE CO.</p> <p><input type="checkbox"/> INDIVIDUAL (septic tank, etc.)</p> <hr/> <p>TYPE OF WATER SUPPLY</p> <p><input type="checkbox"/> PUBLIC OR PRIVATE CO.</p> <p><input type="checkbox"/> INDIVIDUAL (well, cistern)</p>	<p>DIMENSIONS</p> <p>NUMBER OF STORIES</p> <p>TOTAL SQ. FT. OF FLOOR AREA ALL FLOORS, BASED ON EXTERIOR DIMENSIONS</p> <p>TOTAL LAND AREA, SQ. FT.</p>	
<p>PRINCIPAL TYPE OF HEATING FUEL</p> <p><input type="checkbox"/> GAS</p> <p><input type="checkbox"/> OIL</p> <p><input type="checkbox"/> ELECTRICITY</p> <p><input type="checkbox"/> COAL</p> <p><input type="checkbox"/> OTHER</p> <p style="padding-left: 20px;">Specify _____</p>	<p>TYPE OF MECHANICAL</p> <p>WILL THERE BE CENTRAL AIR CONDITIONING?</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>WILL THERE BE AN ELEVATOR?</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>WILL THERE BE SPRINKLERS?</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>NUMBER OF OFF-STREET PARKING SPACES (Enclosed)</p> <p>OUTDOORS</p>	<p>RESIDENTIAL BLDGS. ONLY</p> <p>NUMBER OF BEDROOMS</p> <p>NUMBER OF BATHROOMS</p> <p style="padding-left: 40px;">Full</p> <p style="padding-left: 40px;">Partial</p>

IS THIS PROPERTY LOCATED WITHIN A DESIGNATED HISTORIC DISTRICT? YES NO

Appeal No.

Plan No.

Permit No.

Name		Mailing Address - Number, Street, City, State, Zip	Tel. No.
1. Property Owner			
2. Contractor			
3. Tenant			
4. Architect or Engineer			

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of this jurisdiction. The issuance of this building permit authorizes Building Division employees the right to enter the property at reasonable hours for the purpose of conducting code inspections. The content of the certificate of workers compensation insurance or affidavit on file with Lower Merion Township is still in effect with no changes in coverage of employees.

Signature of Applicant	Address	Application Date
Print Name	Contact Phone #'s	
	Cell Phone #	
	E-mail Address:	

DESCRIBE, IN DETAIL, THE WORK TO BE PERFORMED

DO NOT WRITE BELOW (OFFICE USE ONLY)

PA STATE L & I			
FILE NO:	DRW NO:	DATE:	NOTES
APPROVED BY:	PERMIT FEE:	DATE ISSUED:	PERMIT #:
SITE INSPECTION FEE:	RECEIPT #:	EMPLOYEES: <input type="checkbox"/> YES or <input type="checkbox"/> NO	
IMPERVIOUS SURFACE %:		CURRENT CONTRACTORS LICENSE <input type="checkbox"/> YES or <input type="checkbox"/> NO	