

# BUILDING / ZONING PERMIT APPLICATION

UCCPERMIT# \_\_\_\_\_  
 ZONINGPERMIT# \_\_\_\_\_  
 CMI # \_\_\_\_\_  
 ISSUE DATE \_\_\_\_\_

**LOWER MOUNT BETHEL TOWNSHIP**  
 2004 HUTCHINSON AVENUE  
 MARTINS CREEK, PA 18063  
**Phone:** 610-252-5074  
**Email:** zoning@lowermtbethel.org

PLEASE PRINT LEGIBLY AND FILL OUT FORM

DATE RECEIVED: \_\_\_/\_\_\_/\_\_\_

PROPERTY INFORMATION			
ST NUMBER: _____	STREET: _____	SUITE/APT: _____	ZONING DIST: _____
TAX ID: _____	PIN: _____	LOT SIZE: _____	SQ. FT.: _____
FACILITY NAME: _____	SUBDIVISION: _____	_____	LOT: _____

APPLICANT INFORMATION			
APPLICANT IS:	<input type="checkbox"/> OWNER	<input type="checkbox"/> CONTRACTOR	<input type="checkbox"/> DESIGN PROFESSIONAL <input type="checkbox"/> OTHER _____
NAME: _____	PHONE: _____	CELL: _____	_____
ADDRESS: _____	FAX: _____	EMAIL: _____	_____
CITY: _____	STATE: _____	ZIP: _____	_____
SIGNATURE: _____	_____	_____	_____

An application is hereby made for a permit for construction as indicated herein and which shall be located as shown on the plot plan submitted herewith and/or to use the premises for the purpose herein described. Applicant agrees that such work will comply with all provisions of the Zoning Ordinance, Building

OWNER INFORMATION			<input type="checkbox"/> CHECK HERE IF SAME AS APPLICANT
NAME: _____	PHONE: _____	CELL: _____	
ADDRESS: _____	FAX: _____	EMAIL: _____	
CITY: _____	STATE: _____	ZIP: _____	
SIGNATURE: ** _____	_____	_____	**REQUIRED ON ALL APPLICATIONS

CONTRACTOR INFORMATION			CHECK HERE IF SAME AS APPLICANT
NAME: _____	PHONE: _____	CELL: _____	
ADDRESS: _____	FAX: _____	EMAIL: _____	
CITY: _____	STATE: _____	ZIP: _____	
SIGNATURE: _____	_____	_____	

DETAILED DESCRIPTION OF PROJECT: \_\_\_\_\_

Code, with all deed restrictions and with all other applicable Ordinances of Lower Mt. Bethel Township.

COST \_\_\_\_\_  
 INCLUDING LABOR AND MATERIALS: \$ \_\_\_\_\_

INT. FLOOR SPACE \_\_\_\_\_ SQ.FT. # OF BEDROOMS \_\_\_\_\_ # OF STORIES \_\_\_\_\_ HEIGHT \_\_\_\_\_ FT.

APPLICATION FOR: (CHECK ALL THAT APPLY)		PROPOSED USE:	
<input type="checkbox"/> NEW BUILDING <input type="checkbox"/> ALTERATION <input type="checkbox"/> INTERIOR ALTERATION <input type="checkbox"/> HOME OCCUPATION <input type="checkbox"/> RAZING <input type="checkbox"/> TENNANT FIT OUT <input type="checkbox"/> DRIVEWAY <input type="checkbox"/> GRADING	<input type="checkbox"/> ADDITION TO BUILDING <input type="checkbox"/> ACCESSORY BUILDING <input type="checkbox"/> TEMPORARY BUILDING <input type="checkbox"/> CHANGE OF USE <input type="checkbox"/> PARKING LOT <input type="checkbox"/> FLOOD PLAIN PERMIT <input type="checkbox"/> ROAD OPENING (HOP) <input type="checkbox"/> OTHER (SEE DESC.)	<input type="checkbox"/> ONE FAMILY DWELLING <input type="checkbox"/> TWO FAMILY DWELLING <input type="checkbox"/> TOWNHOUSE <input type="checkbox"/> APARTMENT BLDG. <input type="checkbox"/> STORAGE <input type="checkbox"/> ACCESSORY	<input type="checkbox"/> PLACE OF ASSEMBLY <input type="checkbox"/> BUSINESS (OFFICE) <input type="checkbox"/> EDUCATIONAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> MERCANTILE (STORE) <input type="checkbox"/> OTHER SEE DESC

INGROUND POOL **SEE REVERSE SIDE FOR ADDITIONAL**   
**ABOVEGROUND POOL INFORMATION**

PROPOSED GROSS AREA TO BE CONSTRUCTED (INCLUDE BASEMENT, GARAGE, PORCH/DECK, ALL FLOORS): \_\_\_\_\_ SQ.  
 FT.

**(OVER)**

MISCELLANEOUS INFORMATION			
<input type="checkbox"/> IN FLOOD PLAIN <input type="checkbox"/> PUBLIC WATER <input type="checkbox"/> PRIVATE WELL	<input type="checkbox"/> PUBLIC SEWER <input type="checkbox"/> PRIVATE SEPTIC <input type="checkbox"/> INDUSTRIALIZED	<input type="checkbox"/> MANUFACTURED <input type="checkbox"/> BASEMENT <input type="checkbox"/> ATTACHED GARAGE	<input type="checkbox"/> DETACHED GARAGE  <input type="checkbox"/> OTHER _____
CONSTRUCTION TYPE:		HEATING FUEL:	
<input type="checkbox"/> WOOD <input type="checkbox"/> MASONRY <input type="checkbox"/> _____	<input type="checkbox"/> STRUCTURAL STEEL <input type="checkbox"/> REINFORCED CONCRETE	<input type="checkbox"/> GAS <input type="checkbox"/> OIL <input type="checkbox"/> ELECTRICITY	
SWIMMING POOL DETAILS			
<input type="checkbox"/> FENCE HEIGHT _____ <input type="checkbox"/> LADDER	<input type="checkbox"/> GATE HEIGHT _____ WIDTH _____	<input type="checkbox"/> DECK LENGTH _____	
POOL SIZE _ _ _ FT. X _ _ _ FT. OR DIAMETER _ _ _ FT. = _ _ _ SQ.FT.			

**OFFICE USE ONLY**

DEPARTMENT		APPROVED BY	N/A	DENIAL	DATE	PERMIT FEES:		MISC.
<input type="checkbox"/>	PLANNING					ZONING	\$ .	CONTR. LICENSE
<input type="checkbox"/>	ZONING					BUILDING (UCC)	\$ .	WORKER'S COMP
<input type="checkbox"/>	CMI					OCCUPANCY	\$ .	NOTARIZED FORM
<input type="checkbox"/>	T&M ENG					PA ACT 157	\$ .	
						ADMIN	\$ .	
						DEPOSIT	\$ .	
						BAL DUE	\$ .	

PERMIT ISSUED BY:

DATE: \_\_\_\_\_

PERMIT DENIED BY:

DATE: \_\_\_\_\_

DENIAL REASON:

**NOTE: PAYMENT OF FEE DOES NOT GUARENTEE APPROVAL  
FEES ARE NON-REFUNDABLE**

08/10/2015