## **RESIDENTIAL CONSTRUCTION PERMIT APPLICATION**

	DATE APPLICATION RECEIVED:	
OWNER NAME:		
ADDRESS:		
CITY:	STATE:	ZIP:
PHONE:		
LOCATION OF PROPERTY:		
MUNICIPALITY:	COUNTY:	
DESCRIPTION OF CONSTRUCTION:		
TOTAL SQ. FT. OF CONSTRUCTION:	ESTIMATED COST OF CONSTRUCTION:	
BUILDER NAME:		
DBA:		
ADDRESS:		
CITY: STATE:	ZIP:	
PHONE:		
APPLICANT IS RESPONSIBLE FOR OBTAINING REQUIRED I TRANSPORTATION AS REQUIRED UNDER SECTION 402 OF ABOVE INFORMATION IS TRUE AND CORRECT. I HEREBY A SHALL BE COMPLIED WITH, AS WELL AS THE REQUIREME OR NOT.	F THE STATE HIGHWAY LAW (36 P.S. § 670-420). I H AGREE THAT ALL APPLICABLE PROVISIONS OF TH	HEREBY CERTIFY THAT THE HE MUNICIPALITIES CODES
I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TR REQUIREMENTS INVOLVED WITH ALTERATION, REPAIR AN		OKE DETECTOR
APPLICANT/ AGENT SIGNATURE	PRINT NAME	DATE
**** FOF	R DEPARTMENT USE ONLY ****	
BUILDING PERMIT APPLICATION	BUILDING PERMIT FEE	\$
BY:	MUNICIPAL FEE	\$
DATE:	TRAINING FEE	\$
PERMIT NO.	TOTAL PERMIT FEE	\$