



PENNSBURY TOWNSHIP
CHESTER COUNTY, PENNSYLVANIA
702 Baltimore Pike, Chadds Ford, PA 19317
☎ 610-388-7323 📠 610-388-6036 ✉ info@pennsbury.pa.us

APPLICATION FOR BUILDING PERMIT

Russell Drumheller
702 Baltimore Pike
Chadds Ford, PA 19317
610-388-1790
Code Enforcement Officer

Each applicant must submit the following completed documents prior to issuance of a building permit:

A. Zoning Permit

B. Floor Plans and Foundation Plans (2 copies)

Scale of 1/4" or 1/8" per foot showing materials and

1. Exterior walls, interior partitions, stairs, windows and door sizes and locations, rooms and their intended use.
2. Foundation walls, footings, chimneys, fireplaces, plumbing fixtures, heating equipment, required ventilation equipment, any foundation drains when required.
3. Structural elements including size, material and direction or location of beams, girders, columns, lintels, joists, rafters, studding, furring, any required finishes and bracing.

C. Elevation (Four Exterior Views) - (2 copies) - Showing:

1. Finish grades, depth of foundations and footings, floor to floor heights, roof slopes, height from grade to peak, windows, doors, projections, overhangs and exterior materials.

D. Typical wall section(s) - (2 copies) -- Showing:

1. Materials and thicknesses of footing, foundation wall, sill plates, anchorage, framing, furring, sheathing, insulation, floor to floor heights and final grade.

E. Buildings other than single family dwellings may require additional information

F. Special structures or unusual conditions may require additional information.

G. For small additions some of the above requirements may be waived.

Applications properly completed and received will be reviewed. If approved, they will be signed and Permit issued by the Code Enforcement Officer. At this time a fee will be computed.

**PENNSBURY TOWNSHIP
ADDENDUM TO APPLICATION FOR BUILDING PERMIT**

WORKERS' COMPENSATION INSURANCE COVERAGE INFORMATION

I. APPLICANT

Applicant: _____

A. Applicant is contractor within the meaning of the Pennsylvania Workers' Compensation Law:
() Yes () No

If the answer is "Yes", complete Sections II and III below, as appropriate.

B. Applicant has hired or intends to hire a contractor within the meaning of the Pennsylvania Workers' Compensation Law.
() Yes () No

II. APPLICANT'S FEDERAL OR STATE IDENTIFICATION NUMBER: _____

If Applicant is a qualified self-insurer for Workers' Compensation, attach Certificate of Insurance to this Addendum

If Applicant subscribes for Workers' Compensation Insurance:

Name and address of Workers' Compensation Insurer _____

Policy Number: _____ Policy Expiration Date: _____

Attach Certificate of Insurance to this Addendum

NOTE: Pennsbury Township must be named as an additional insured on all Certificates of Workers' Compensation and/or on all Certificates of Qualified Self-Insurance.

III. EXEMPTION

This Section is to be completed ONLY if Applicant is a contractor claiming exemption from providing Workers' Compensation Insurance.

The undersigned swears/affirms that he/she is not required to provide Workers' Compensation Insurance under the provisions of Pennsylvania Workers' Compensation Law for one of the following reasons, as indicated:

- () Religious Exemption
() Contractor has no employees.

NOTE: Contractor is prohibited from employing any individual to perform any work in connection with the building permit unless and until contractor provides to Pennsbury Township satisfactory proof of insurance.

In the event that Pennsbury Township receives actual notice that a building permittee who has filed an affidavit of exemption from Workers' Compensation Insurance has hired employees to perform work in connection with the building permit and has not obtained the required insurance and provided Pennsbury Township with the requisite information, Pennsbury Township shall issue a stop work order. Such stop work order shall remain in effect until proper Workers' Compensation coverage is obtained and proper documentation is received by Pennsbury Township.

APPLICANT'S SIGNATURE

STATE OF PENNSYLVANIA
COUNTY OF CHESTER

On this _____ day of _____, 20 _____, before me, the undersigned officer, personally appeared _____, known to me (or satisfactorily proven) to be the persons whose names are subscribed to the within instrument, and acknowledge that they executed the same for the purpose therein contained. IN WITNESS WHEREOF, I hereunto set my hand and official seal.

Notary Public (Seal)