LOWER OXFORD TOWNSHIP 220 Township Road • Oxford • PA • 19363 Phone: 610-932-8150 ext. 1 STAMPED/SEALED PLANS & PLAN REVIEW REQUIRED					BUILDING PERMIT & APPLICATION NEW COMMERCIAL BUILDING								
TPI # 50	ô		Da	te of Ap	plicatio	n:	_/		Permit	# L	OT		C
Owner:									Cell No.				
Property Add	ress:								Phone No				
Tenant:								Cell No.					
Address:								Phone No.					
Contractor:									Cell No.				
Add	ess:								Phone No				
S/D Name:				Lot No.:		Lot Size:			Acre(s) Non-C	Conform	ing Lot	? 🗆 Yes	□ No
	Buildin	g Construction	Use	Use: Commerci			Zoning			nce Requ □ No			
<b>7</b> 1**		dth:	Lengt			Total Sq.	Distric Ft.	SWM V	Vaiver Required?		i ⊡ No i	⊐ N/A	
DIMENSIONS									Existing Imperviou				
					SWM Plan Required?  □ LDP □ SWM Submittal □ NPI								
Remarks: Pleas plans required for			Building I	nspector a	at least 24	hours pric	or to each	n inspec	tion (Refer to p	lan revie	ew shee	t). Three	e (3) sets of
I hereby certify that and we agree to co essential, and any e	nform to erroneo	o all applicable la us information co	ws of this juntained her	irisdiction. ein shall rei	We also ur nder the Pe	nderstand th ermit invalid	at all infor ab initio, v	mation c vithout re	ontained in this be egard to whether o	uilding pe construct	ermit appl ion has co	lication is ommence	agreed to be
Signature of Owner													
Signature of Contra													
Signature of Ap	piova	Sco	tt Moran,	BCO (PA	UCC #44	26)	· · · · · · · · · · · · · · · · · · ·		Date	•			
Estimated Cost of Project: \$					Lower Oxford Township Permit Fee \$ Accurate Building Inspections Fee \$						Chk No Chk No		
Proposed Use:													
Amusement/Recre			irch, other re	-			! 1		Public Utility	-		ucational/S	chool
Service Station, re     Device Station, re     Device Station, re	Service Station, repair garage Hospital, Public Utility Parking (		king Garage	Ional	nal Office, Bank, Profe					е	Other		
Ownership:	D Privat	e (Individual, cor	poration, no	on-profit Ins	titution, etc	.) or □	Public (F	ederal, S	State, or Local Gov	vernment	:)		
Principal Type of			y (Wall Bea		□ Wood Fr	,	□ Structur	al Steel	□ Reinforced	Concret	e 🖂	Mobile	
Principal Type of					tricity ⊏		other – S						
Type of Sewage	Dispos	al: □ Private	(septic tan	k, etc.) □	□ Existing	□ New (Ne	eds CCHI	) Approv	/al) □ Public or	Private	Company	1	
Type of Water Su	ipply:	Private (Well/0	Cistern)	Existing	□ New (	Needs CCH	D approva	al) 🗆 F	Public or Private C	Company			
Type of Mechani	cal: Ce	entral Air Condit	ioning? 🗆	Yes 🗆 No	Elevat	tor? ⊡Yes	□ No						
Driveway/Entran	ce Perr	nit Needed?	□ Yes □	No - □ To	wnship - □	PennDOT	(Applicant	submits	directly to State)	□ Existi	ng		
<ul> <li>Permit becomes i</li> <li>Permit holder ma</li> <li>No permit may b</li> </ul>	y reque	st an extension to	begin cons ears from it	tructiona s issue date.	pproval mu	ist be in writ		Paym	andoned for more ent to Secretary/Treas Neather Card to Buildin	urer:		er work be /	egins 

## \*\*\*SEE ATTACHED FEE SCHEDULE\*\*\*

THIS PERMIT CONVEYS NO RIGHT TO OCCUPY ANY STREET, ALLEY OR SIDEWALK OR ANY PART THEREOF, EITHER TEMPORARILY OR PERMANENTLY ENCROACHMENTS ON PUBLIC PROPERTY, NOT SPECIFICALLY PERMITTED UNDER THE BUILDING CODE, MUST BE APPROVED BY THE JURISDICTION, STREET OR ALLEY GRADES AS WELL AS DEPTH AND LOCATION OF PUBLIC SEWERS MAY BE OBTAINED FORM THE DEPARTMENT OF PUBLIC WORKS. THE ISSUANCE OF THIS PERMIT DOES NOT RELEASE THE APPLICANT FROM THE CONDITIONS OF ANY APPLICABLE SUBDIVISION RESTRICTIONS.

MINIMUM OF THREE CALLED INSPECTIONS CONSTRUCTION WORK:	S REQUIRED FOR ALL	CARD KEPT POS	IS MUST BE RETAINED ON JOB AND THIS TED UNTIL FINAL INSPECTION HAS BEEN
1) FOUNDATIONS OR FOOTINGS.			CERTIFICATE OF OCCUPANCY IS REQUIRED,
2) PRIOR TO COVERING STRUCTURAL	MEMBERS (READY FOR		SHALL NOT BE OCCUPIED UNTIL FINAL
LATH OR FINISH COVERING).		INSPECTION HAS	BEEN MADE.
3) FINAL INSPECTION BEFORE OCCUPA	ANCY.		
POST THIS	CARD SO IT IS	VISIBLE FRO	OM STREET
<b>BUILDING INSPECTION APPROVALS</b>	ELECTRICAL INS	PECTIONS	HEATING/PLUMBING INSPECTIONS

			DATE CERTIFICATE OF OCCUPANCY ISSUED:
			 Issued by: 
WORK SHALL NOT PROCEED UNTIL THE INSPECTOR HAS APPROVED THE VARIOUS STAGES OF CONSTRUCTION.	CON	MIT WILL BECOME NULL AND VOID STRUCTION WORK IS NOT STARTED WITH MONTHS OF DATE THE PERMIT IS ISSUED:	

## **Commercial or Industrial**

Construction Fee Multiplier: Project or Building Area Sq. Ft. (Min 3,000 sq. ft.) * Usage Group Factor *	* .30 = Building Permit Fee (Area * Use	* Base)
Municipal Base Fee (20% of Base Fee) Certificate of Occupancy Temporary Certificate of Occupancy UCC Fee		\$50.00 \$25.00
Remodeling (Base Fee) Note: Remodeling does <u>NOT</u> include any of the following: • Change in Occupancy/Use Group • Addition or Upgrade of Electrical, Plumbing, or HVAC services	<ul> <li>Modify Structural or Firewalls</li> <li>Addition to structure of any kind</li> </ul>	\$0.20 sq
Alterations or Repairs to Electrical, Gas, Mechanical, or Plumbing Single Event Permit (one inspection only) Annual Event Permit (Additional inspections in each appropriate discipline		
Accessory Structure of Modular or Mobile Design (Includes Job Tra Permit Fee Plan Review Inspection (Electrical)	, 	\$100.00 \$100.00