

APPLICATION FOR BUILDING PERMIT
MUNICIPALITY OF PENN HILLS
CODE ENFORCEMENT DEPARTMENT
102 DUFF ROAD
PENN HILLS , PA 15235
OFFICE # (412)342-1192 / FAX # (412)342-0023

Page # 1

Note: Please Print or Type This Application

IMPORTANT - Applicant to complete all sections.

LOCATION OF BUILDING

Start here:

(At location) (No.) (Street or Road) (Zoning District)

(Subdivision) (Lot) (Lot & Block)

TYPE OF IMPROVEMENT

PROPOSED USE FOR RESIDENTIAL

CHECK BLOCK FOR TYPE OF WORK BEING DONE.

- New building
- Addition (if residential enter No. of new housing units added, if any in two or more family units.
- Alteration
- Repair, Replacement
- Wrecking (if multi-family residential enter no. of units in building _____)
- Moving or Relocation of building
- Foundation only

(WRECKING MOST RECENT USE)

- one family
- two or more family-enter no. of units _____
- Transient hotel, motel or dormitory enter number of units _____
- Garage
- Carport
- Portable pools (\$25)
- Inground pool
- Decks (\$50)
- Other-Specify _____

OWNERSHIP

- Private(individual, corporation, nonprofit institution etc.)
- Public (federal, state, or local government)

NON-RESIDENTIAL

- Amusement, recreational
- Church, other religious
- Industrial
- Parking Garage
- Service Station, Repair garage
- Hospital
- Office, bank, professional
- Public Utility
- School, library, other educational
- Stores, mercantile
- Tanks, towers
- Other-Specify _____

COST

Cost of Improvement \$ _____

To be installed but not included in above cost.

Electrical \$ _____

Plumbing \$ _____

Heating \$ _____

Other (elevator, etc.)\$ _____

TOTAL COST OF IMPROVEMENT \$ _____

Describe in detail proposed use of buildings, etc.

If addition location side yard, front yard, rear yard and size of addition.

PRINCIPAL TYPE OF FRAME

- Masonry (wall bearing)
- Wood frame
- Structural steel
- Re-inforced concrete
- Other-Specify _____

PRINCIPAL TYPE OF HEATING FUEL

- Gas
- Oil
- Electricity
- Coal
- Other-Specify _____

TYPE OF SEWAGE PROPOSAL

- Public or private company
- Private (Septic tank, etc.)

TYPE OF WATER SUPPLY

- Public or private company
- Private (well, cistern)

TYPE OF MECHANICAL

Will there be central air conditioning ?
 Yes No
 Will there be an elevator ?
 Yes No

DIMENSIONS

Number of stories _____
 Total sq. ft. of floor area (all floors based on exterior dimensions) _____
 Total land area, sq. ft. _____

NUMBER OF OFF STREET PARKING SPACES

Enclosed
 Outdoors

RESIDENTIAL BUILDING ONLY

Number of bedrooms _____
 Number of bathrooms _____
 (full) _____ (partial) _____

IDENTIFICATION-To be completed by all applicants

NAME/OWNER _____ **MAILING ADDRESS** _____ **ZIP CODE** _____ **TELEPHONE NO.** _____

LESSEE _____

ARCHITECT OR ENGINEER _____

CONTRACTOR _____

I hereby certify that the proposed work is authorized by the owner of record. I am either the owner of record or have been authorized by the owner to make this application and we agree to conform to all applicable laws of the Municipality of Penn Hills. I also certify that I have read and understand the attached building permit matters of advice and that all information in this application is true and correct.

Signature of applicant _____

VALIDATION (FOR DEPARTMENT USE ONLY)

BUILDING PERMIT NO.	B- _____
RECEIPT NUMBER	_____
BLDG. PERMIT FEE	\$ _____
OCCUPANCY PERMIT	\$ _____
TAP-IN FEE	\$ _____
CONTRACTOR REG.	\$ _____
STATE LAW FEE	\$5.00 DOLLARS ALL PERMITS
TOTAL	\$ _____

USE GROUP BUILDING CODE

- R-1
- R-2
- R-3
- R-4
- B
- A

OTHER- SPECIFY _____

CONDITIONS ATTACHED: YES

NO

APPROVED BY _____

PERMIT ISSUED DATE: _____

Title: _____