

WRIGHTSTOWN TOWNSHIP, Bucks County, Pennsylvania

2203 Second Street Pike,
Wrightstown, PA 18940-9662
215-598-3313
215-598-0529 FAX



Permit #:	_____
Permit Fee	_____
Escrow Fee	_____
Check #'s	_____
Total	_____
Date	_____

BUILDING/ ZONING PERMIT APPLICATION

A Building/Zoning Permit is required before: 1) Occupying or using any vacant land or any structure; 2) Changing the use of any lot or structure; 3) Erection, construction, reconstruction, alteration, razing or removal of any structure or building, including accessory structures such as sheds, garages, fences, etc; 4) Changing of a non-conforming use. Check all that apply below:

- | | | |
|--------------------------------------|--|--|
| <input type="checkbox"/> Land Use | <input type="checkbox"/> Frontage/Drainage | <input type="checkbox"/> Historic District |
| <input type="checkbox"/> Sign | <input type="checkbox"/> New Construction | <input type="checkbox"/> Addition |
| <input type="checkbox"/> Alterations | <input type="checkbox"/> Replacement | <input type="checkbox"/> Demolition |
| <input type="checkbox"/> Foundation | <input type="checkbox"/> Other _____ | |

TMP # 53 - _____ Date _____

Zoning District: Check one: ___ CM ___ CR1 ___ CR2 ___ R2 ___ PS
___ VR1 ___ VR4 ___ VC1 ___ VC2 ___ RI
___ RIA ___ QA ___ MS ___ EIR

Sewage Disposal: ___ Public ___ On Lot Water Supply: ___ Public ___ Private

Bucks County Health Dept Permit # _____ Date Issued _____

Proposed Use (example: Single Family Dwelling, Timbering, Driveway, etc.):

Information:

Applicant: _____ Phone # _____

Email: _____

Address: _____

Property Owner: _____ Phone # _____

Email: _____

Address: _____

Contractor: _____ **Phone #** _____

Email: _____

Contractors PA License # : _____

Address: _____

Location/Address of Work: _____

Subdivision: _____ **Lot #** _____

EASEMENTS:

Are there any easements/zoning restrictions on the property? If so, please describe: _____

PLOT PLAN:

- Provide scaled plan of entire property in duplicate, identify adjacent streets.
- Place all buildings with size dimensions within property lines and indicate whether existing or proposed. Indicate front, rear and side yard setbacks by showing the distance from buildings to property lines on all sides.

Size of Lot(s) in square feet or acres: _____

Lot Measurements: Front _____ Side _____

 Rear _____ Side _____

Distance of Building from Lot Lines: Front _____ Side _____

 Rear _____ Side _____

Proposed Start Date: _____ Estimated Completion Date _____

Estimated Cost of Construction (attach contracts): _____

PRINCIPAL TYPE OF CONSTRUCTION

Masonry Wood Frame Structural Steel

Reinforced Steel Other _____

Dimensions:

Number of Stories _____ Building Height _____

Total Square Feet of Ground Coverage of Proposed Building: _____

Total Measure of Exterior Dimensions: _____

Total Square Feet of Floor Area, All Floors **-Existing:** _____

Total Square Feet of Floor Area, All Floors **-Proposed:** _____

RESIDENTIAL BUILDINGS ONLY

Number of Dwelling Units: Existing _____ Proposed _____

() Single Family () Multi Family Number of Fireplaces _____
 Number of Bedrooms: _____ Number of Bathrooms _____ Full _____ Partial _____
 Garage _____ Attached () Detached () Dimensions _____
 Other Type of Structure/Use: _____

NON-RESIDENTIAL BUILDING and HOME OCCUPATIONS

Existing Use of Building or Portion of Building to be Occupied: _____

Proposed Use of Building or Portion of Building, Including Operations, Products, Etc.

Number of Off-Street Parking Spaces: Enclosed _____ Outdoor _____

Number of Employees: _____ Square Feet of Building to be Occupied: _____

Type of Outside Storage/Display/Signage Proposed: _____

Property Review (Please Check one):

___ I hereby grant permission to the Wrightstown Zoning Officer or his designee to access my property as part of the application review process.

___ I DO NOT grant permission to the Wrightstown Zoning Officer or his designee to access my property as part of the application review process.

This application must be accompanied by a \$100 Administrative review fee (if submitting any electrical plans for review an additional \$100 is required). Subsequent reviews are also an additional \$100. The applicant will be notified upon review and calculation of required permit fees and escrow fees. All unused escrow fees shall be returned upon written request, but said request must be made within thirty (30) days of the issuance of a Use and Occupancy. Failure to do so will result in the funds being forfeited and transferred to the General Fund to offset administrative expenses.

Signature of Applicant

Date

Signature of Owner (**Required** if different from Applicant)

Date