

New Stanton Borough

BUILDING SUBCODE TECHNICAL SECTION

Date Received _____
Date Issued _____
Control # _____
Permit # _____

A. IDENTIFICATION-APPLICANT*. COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE.

Block _____ Lot _____
Work Site Location _____

Owner in Fee _____
Address _____
Tele. (_____) _____
Contractor _____
Address _____

Tele. (_____) _____ Fax (_____) _____
Lic. No. or Builders Reg. No. _____
Federal Emp. No. _____

0. TECHNICAL SITE DATA

DESCRIPTION OF WORK

JOB SUMMARY (Office Use Only)		Dates (Month/Day)			
PLAN REVIEW	Date Initial	INSPECTIONS	Failure	Failure Approval	Initial
<input type="checkbox"/> No Plans Required	____	Type:	_____	_____	_____
<input type="checkbox"/> All	____	Footing	_____	_____	_____
<input type="checkbox"/> Footing	____	Foundation	_____	_____	_____
<input type="checkbox"/> Foundation	____	Slab	_____	_____	_____
<input type="checkbox"/> Frame	____	Frame	_____	_____	_____
<input type="checkbox"/> Other	____	Barrier-Free	_____	_____	_____
Joint Plan Review Required:		Insulation	_____	_____	_____
<input type="checkbox"/> Elec. <input type="checkbox"/> Plumb. <input type="checkbox"/> Fire <input type="checkbox"/> Elevator Finishes		Energy	_____	_____	_____
Date: _____		Mechanical	_____	_____	_____
Approved by: _____		TCO	_____	_____	_____
_____		Other	_____	_____	_____
		Final	_____	_____	_____

- TYPE OF WORK:
- New Building
 - Addition
 - Alteration
 - Roofing
 - Siding
 - Fence _____ Height (exceeds 6)
 - Sign _____ Sq. Ft.
 - Pool
 - Demolition

FEE (Office Use Only)

\$ _____

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____
Constr. Class Present _____ Proposed _____
No. of Stories _____
Height of Structure _____ Ft.
Area - Largest Floor _____ Sq. Ft.
New Bldg. Area/All Floors _____ Sq. Ft.
Volume of New Structure _____ Cu. Ft.
Total Land Area Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. \$ _____
2. Alteration \$ _____
3. Total (1 + 2) \$ _____

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Signature

Administrative Surcharge \$ _____
Minimum Fee \$ _____
Fee \$ _____
TOTAL FEE \$ _____