



HILLTOWN TOWNSHIP

13 West Creamery Road
P.O. Box 260
Hilltown, PA 18927
(215) 453-6000 Fax: (215) 453-1024
www.hilltown.org

**SEE ADDITIONAL
INSTRUCTIONS ON
REVERSE**

Residential Building Permit Application

To be used for One- and Two-Family Dwellings and their accessory structures only.

<u>Application Type</u>	<input type="checkbox"/> New Dwelling		<input type="checkbox"/> Addition (incl Roofed Porches)		<input type="checkbox"/> Deck/Patio (No Roof)	
	<input type="checkbox"/> Detached Accessory		<input type="checkbox"/> Finished Basement		<input type="checkbox"/> Alteration	
	<input type="checkbox"/> In-Ground Swimming Pool		<input type="checkbox"/> Above Ground Swimming Pool			
	<input type="checkbox"/> Other (describe): () Plumbing () Electric () Mechanical (HVAC)					
<u>Project Description</u>	Est. Project Value: \$					
<u>Property Owner Information</u>	Name					Initial if we may contact you via E-Mail _____
	Address					
	Phone:		Fax:			
	E-Mail					
<u>Contractor Information</u>	Name					Initial if we may contact you via E-Mail _____
	Address					
	Phone:		Fax:			
	E-Mail					
<u>Design Professional in Responsible Charge</u> (if Applicable)	Name					Initial if we may contact you via E-Mail _____
	Address					
	Phone:		Fax:			
	E-Mail					
<u>Property Information</u>	Tax I.D. #					
	Address					
<u>Project Information</u>	Bedrooms:	Existing: _____		Proposed (total): _____		
	Bathrooms:	Existing: _____		Proposed (total): _____		
	Will the project be Heated/Cooled?		() YES () NO			
Type of Heating System:						

Who should be contacted regarding this Application? _____

APPLICANT'S CERTIFICATION:

I hereby certify that all information on this form and attached documentation is true, to the best of my knowledge. Further, I am the owner, or am authorized by the owner, to submit this application. In addition, if a permit for the project is issued, I certify that the Hilltown Township Building Code Official(s) is/are authorized to enter those areas of the property affected by the permit at any reasonable hour to inspect for compliance with the permit and the Pennsylvania Uniform Construction Code.

APPLICANT'S Signature: _____ **Date:** _____

ADDITIONAL INSTRUCTIONS TO APPLICANT:

- 1.) **FAXED APPLICATION & PLANS WILL NOT BE ACCEPTED.**
- 2.) Attach two (2) complete sets of all plans and specifications.
- 3.) For projects that are to be heated or cooled, a REScheck report is required. REScheck software may be downloaded from: <https://www.energycodes.gov/rescheck>
- 4.) For projects involving electrical, electrical plans must be submitted.
- 5.) For projects involving plumbing, plumbing drawings must be submitted.
- 6.) For projects involving mechanical (HVAC) work, mechanical drawings must be submitted.

DO NOT WRITE BELOW THIS LINE, FOR OFFICE USE ONLY

TYPE OF STRUCTURE _____

USE (Accessory/Principal) _____

Approximate Size: _____ wide x _____ long x _____ high

Construction Type: _____ **ICC Use Group** _____

Foundation Type: _____

REMARKS: _____

Permit Fee: _____ **Approved:** _____
(signature) (date)

Fee Calculation: