

JACKSON TOWNSHIP

ADMINISTRATIVE BUILDING PERMIT APPLICATION

This permit application package is for a

Jackson Township Administrative Building Permit.

All new structures must obtain an Administrative Building Permit.

In addition, a Pennsylvania State UCC Building Permit may still be needed for your project. Please call your local Light-Heigel UCC Inspector, Curtis O'Neill, (570) 524-7742 to verify compliance with PA UCC Code.

All construction is also subject to the Jackson Township Stormwater Ordinance as required by Pennsylvania Act 167.

JACKSON TOWNSHIP

450 Bastian Road Halifax, PA 17032 717-362-9909

Administrative Building Permit Application to Construct or Demolish

For use by Principal Authority	
Application number:	Permit number (if different):
Date received:	UCC

A. Project information			
Building number, street name		Tax Parcel #	Lot/con.
Municipality	Postal code	Plan number/other description	
Project value est. \$		Area of work	
B. Applicant			
Applicant is: <input type="checkbox"/> Owner or <input type="checkbox"/> Authorized agent of owner			
Last name	First name	Corporation or partnership	
Street address		Unit number	Lot/con.
Municipality	Postal code	State	E-mail
Telephone number ()	Fax ()	Cell number ()	
C. Owner (if different from applicant)			
Last name	First name	Corporation or partnership	
Street address		Unit number	Lot/con.
Municipality	Postal code	State	E-mail
Telephone number ()	Fax ()	Cell number ()	
D. Builder			
Last name	First name	Corporation or partnership (if applicable)	
Street address		Unit number	Lot/con.
Municipality	Postal code	State	E-mail
Telephone number ()	Fax ()	Cell number ()	

E. Purpose of application

- | | | | | |
|--|---|--|---|--------------------------------------|
| <input type="checkbox"/> New construction | <input type="checkbox"/> Addition to an existing building | <input type="checkbox"/> Swimming Pool | <input type="checkbox"/> Demolition | <input type="checkbox"/> Residential |
| <input type="checkbox"/> Mobile Home | <input type="checkbox"/> Deck | <input type="checkbox"/> Above Ground | <input type="checkbox"/> Other (Describe Below) | <input type="checkbox"/> Commercial |
| <input type="checkbox"/> Manufactured Home | <input type="checkbox"/> Shed | <input type="checkbox"/> In Ground | | |

Proposed use of building

Current use of building

Description of proposed work

F. Attachments

- i. Attach site plan. Site Plan must show all Property Lines and Dimensions.
- ii. Attach Worker's Compensation Form.
- iii. Enclose a check for \$50.00 made payable to "Jackson Township".

G. Declaration of applicant

I _____ certify that:
(print name)

The information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge.

_____ Date

_____ Signature of applicant

INSTRUCTIONS FOR SITE PLAN

The following information shall be used to prepare the required site plan for an Administrative Building Permit:

- Site plan shall be drawn to a scale.
- Show accurate boundary (property) lines, lot size and dimensions.
- Show North direction with an arrow.
- Show location, orientation and dimensions of the proposed structure.
- Show all existing structures on the property.
(Include sheds, pools, well, septic, drain field, etc.).
- Show driveway location and dimensions.
- Show location of easements and right-of-way(s). (If applicable)
- Indicate the height and square feet of the proposed structure(s).
- Show the distances from the proposed structure to the: **a]** Road (front), **b]** Both sides of lot property lines, **c]** Rear of Lot, **d]** other structures

Jackson Township Building set back requirements are as follows:

Sides - 15'

Rear - 25'

Front setback varies with road type -

- 40' setback required Arterial Highway: Armstrong Valley Rd. (Rt. 225)
- 30' for Collector Roads: Mountain House, Powells Valley, Small Valley, Enders, Dividing Ridge, Creek, Millers Church and Rutter Roads
- 25' for all other local and minor roads

If you are not sure of the exact location of your property lines, a lot survey may be necessary by you to verify the property lines for compliance with the Townships' minimum yard setbacks. The Township is not responsible for any survey to verify the property lines.

WORKER'S COMPENSATION INSURANCE COVERAGE INFORMATION

- A. The Applicant or Authorized Agent is
A contractor within the meaning of the Pennsylvania Worker's Compensation Law
 YES NO

If the answer is "yes" complete Section B, if "no" complete section C below.

B. Insurance Information

Name of Applicant _____

Federal or State Employer Identification No. _____

Applicant is a qualified self-insurer for Worker's Compensation. Certificate Attached

Name of Worker's Compensation Insurer _____

Worker's Compensation Insurance Policy

No. _____ Certificate Attached

Policy Expiration Date: _____

C. Exemption

I, _____, do attest that I will not employ/hire any other persons for the project for which I am seeking a building permit.

After receipt of the building permit, if I employ any other persons, I will notify this office and provide proof of workers' compensation coverage within three working days.

I understand that failure to comply, will result in a STOP-WORK order and that such order may not be lifted until proper coverage is obtained, as provided by Section 302(e)(4) of the act of June 2, 1915 (P.J. 736), known as the Pennsylvania Workers' Compensation Act, reenacted and amended June 21, 1939 and amended December 5, 1974 and amended July 2, 1993, Act 44.