





TO BE ACCEPTED, ROOF PERMIT APPLICATIONS MUST INCLUDE EACH OF THE FOLLOWING:

Completed building permit application. Must be filled out and signed by the contractor or person doing the work. On your application, please provide a valid email address for correspondence. No faxed or emailed applications will be accepted.
Certificate of insurance showing Worker's Compensation coverage <i>OR</i> a notarized exemption affidavit form. The insurance certificate must list Whitehall Township as the certificate holder. <i>We do not keep any insurance certificates on file</i> .
<u>For residential roof repairs or replacements</u> , provide a detailed listing of materials to be used on the roof.
Residential roof permit fees: The total permit fee for a RESIDENTIAL roof re-shingle with NO structural changes is \$159.50 and must be paid at time of submission. O PLEASE NOTE: Replacements involving structural changes/repairs of any type will require additional inspections and will result in additional fees over and above the \$159.50 amount. Remaining balance can be paid at permit issuance.
 For commercial/multi-family roof repairs or replacements, Submit THREE (3) copies of the listing of materials to be used including underlayment, drip edge flashing, ice shield, and finish materials. Cut sheets and/or manufacturer's instructions should be submitted on multiply and built-up roof systems. Must indicate the square footage of the affected area in the "building dimension" section of the building permit application.
Commercial roof permit fees: The non-refundable permit application fee of \$150.00 is due at time of submission. Additional fees will be due at permit issuance.
Contractor must contact the Treasurer (Ext. 1143) for business license status/requirements. No work can be done in the township without a valid license.

ALL ITEMS MUST BE COMPLETE AT TIME OF SUBMISSION. FAILURE TO COMPLETE ALL ITEMS WILL RESULT IN APPLICATION DENIAL.

Please submit all documents to the Township at 3219 MacArthur Road, Whitehall, PA 18052.

WHITEHALL TOWNSHIP 3219 MACARTHUR ROAD WHITEHALL, PA 18052

LOCATION OF PROPOSED WORK OR IMPROVEMENT	Zoning District For Zoning District For Zoning District For Zoning District
Site Address:	Tax Parcel # 🛱
Lot # Subdivision/Land Development:	•"
Owner:	Email:
Mailing Address:	Phone #:
Occupant/Tenant:	Email:
Mailing Address: Contractor:	Phone #: >
Contractor:	Email:
Mailing Address:	
Architect:	Email:
Mailing Address:	
NOTE: If setting up a manufactured home, the following number * MANUFACTURED HOUSING BOARD LICENSE # ESTIMATED COST OF CONSTRUCTION (reasonable fair to be set to	er is also REQUIRED .
DESCRIPTION OF BUILDING USE RESIDENTIAL □ One-Family Dwelling (R-3) □ Two-Family Dwelling (R NON-RESIDENTIAL Specific Use: Change in Use □ YES □ NO If yes, Indicate Former: Maximum Occupancy Load Maximum	Use Group:
Does or will your building contain any of the following: Fireplace(s): Number Type of Fuel BTU's _ Elevator/Escalators:	onditioning (<i>i.e.</i> electric, gas, oil, etc.) Service: (<i>Check</i>) □ Public □ Private

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BUILDING DIMENSIONS								
Existing Building Area:	_	Number Of Stories:						
Proposed Building Area:		Height of Structure Above Grad						
Total Building Area:	sq. ft.	Area of the Largest Floor:	sq. ft.					
FLOODPLAIN (This section is REQU	JIRED to be comp	leted)						
Is the site located within an iden	tified flood prone ε	area? (Check One)	□NO					
What Zone? (Check One)		VFC	□NO					
Will any portion of the flood pro	· · · · · · · · · · · · · · · · · · ·	ed? (Check One)						
National Flood Insurance Progra	am and the Pennsyl	vania Flood Plain Management Acf Structures \$	t (Act 166-1978),					
****Start of work must comme	nce within 180 day	ys from the issuance of permit **	**					
PROPERTY OWNER CERTIFICATION	N							
I, the owner/lessee of the property subje		permit do hereby acknowledge that	it is my sole					
•	responsibility to be certain the exact location of my property lines, as well as any Flood Hazard areas, other							
	covenants, deed restrictions, easements or rights of way encumbering same (as shown on my deed); and by							
submitting this permit application am c		oposed construction will be in acco	rdance to all required					
setbacks, based upon my property locat	1011.							
PROPERTY		DDINTENIAME						
OWNER SIGNATURE X		PRINT NAME						
The applicant certifies that all information	on this application	is correct and the work will be compl	eted in accordance with t					
"approved" construction documents and Prequirements adopted by the Municipality. To setback lines, easements, rights-of way, flow construed as authority to violate, cancel or set body. The applicant certifies he/she underst	A Act 45 (Uniform the property owner an od areas, etc. Issuand taside any provisions	Construction Code) and any addition displicant assumes the responsibility of ce of a permit and approval of construction of the codes or ordinances of the Municipal construction.	nal approved building coof locating all property line ation documents shall not be					
Application for a permit shall be made involved, or <i>agent</i> of either, or by the								
I certify that the code administrator or to enter areas covered by such permit such permit.	at any reasonable	-						
SIGNATURE of Property Own	er	Print Name of Property Ov	vner					
x								
SIGNATURE of Authorized Agen	nt/Contractor	Print Name of Authorized Age	nt/Contractor					
Contractor Address			Date					
Directions to Site:								

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FOR CODE ADMINISTRATOR USE ONLY

ADDITIONAL PERMITS / APPROVALS REQUIRED:								
STREET CUT/DRIVEWAY □ CUT AND FILL □ PENNDOT HIGHWAY OCCUPANCY □ DEP FLOODWAY OR FLOODPLAIN □ SEWER CONNECTION □ ON-LOT SEPTIC □ ZONING □ HARB □ OTHER_		APPROVED						
PROJECT DOCUMENTS (D	RAWINGS & CAL	CULATIONS)						
Type of document:	Submitted	Signed & Sealed	Date:	Revision Date:				
Foundation Plans	☐ Yes ☐ No	☐ Yes ☐ No						
Construction Drawings	☐ Yes ☐ No							
Electrical Drawings	☐ Yes ☐ No	☐ Yes ☐ No		<u> </u>				
Mechanical Drawings	☐ Yes ☐ No							
Plumbing Drawings	☐ Yes ☐ No		-	<u> </u>				
Specifications Workers Comp Certificate	☐ Yes ☐ No ☐ Yes ☐ No	☐ Yes ☐ No		<u></u>				
APPROVALS:								
BUILDING PERMIT DENIED: Date Date Returned								
BUILDING PERMIT APPRO			Date					
ZONING / CODE ADMINISTRATOR								
Date Issued	Date of Inspe	ection						
BUILDING PERMIT FEE		SPRINKLER PE	ERMIT FEE (if	`appl.)				
PLAN REVIEW FEE (if appl.)								
TOWNSHIP FEE		APPLICATION FEE (if appl.)						
PA STATE UCC FEE								

NOTES:

TOTAL DUE

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