



# NORTH WHITEHALL TOWNSHIP

3256 LEVANS ROAD, COPLAY, PA 18037  
610-799-3411 610-799-9629 FAX  
www.northwhitehall.org

# ELECTRICAL MECHANICAL PLUMBING PERMIT APPLICATION

MAIL  PICK-UP

**NOTE: Submissions must include one (1) plot plan containing the information required by Section 103.D.3 of the NWT Zoning Ordinance and three (3) full sets of construction plans to be considered complete. Proof of, or waiver from, Workman's Compensation Insurance must be provided at time of submission.**

### A. PERMIT TYPE

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> HOOKUP TO PUBLIC WATER SYSTEM | <input type="checkbox"/> HYDRONIC HEATING SYSTEM             | <input type="checkbox"/> SPA/HOT TUB                |
| <input type="checkbox"/> HOOKUP TO PUBLIC SEWER SYSTEM | <input type="checkbox"/> ADDITIONAL METER OR PANEL           | <input type="checkbox"/> HEATING SYSTEM _____ KW    |
| <input type="checkbox"/> NEW BATHROOM-COMMERCIAL       | <input type="checkbox"/> NEW ELECTRIC SERVICE _____ AMPS     | <input type="checkbox"/> HVAC/HEAT PUMPS-COMMERCIAL |
| <input type="checkbox"/> NEW KITCHEN-COMMERCIAL        | <input type="checkbox"/> REPLACE ELECTRIC SERVICE _____ AMPS | <input type="checkbox"/> FIREPLACE                  |
| <input type="checkbox"/> ALARM SYSTEM-COMMERCIAL       | <input type="checkbox"/> BASEBOARD _____ # OF UNITS          | <input type="checkbox"/> GENERATOR                  |
| <input type="checkbox"/> WATER HEATER-COMMERCIAL       | <input type="checkbox"/> OUTLETS/SWITCHES                    | <input type="checkbox"/> OTHER: PLEASE EXPLAIN      |

### B. PROPOSED USE

- SINGLE FAMILY  ACCESSORY  MULTI-FAMILY  COMMERCIAL

### DESCRIPTION OF PROPOSED WORK:

### C. IDENTIFICATION

PROJECT LOCATION (ADDRESS): \_\_\_\_\_

OWNER: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ PHONE #: \_\_\_\_\_

APPLICANT: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ PHONE #: \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ PHONE #: \_\_\_\_\_

HOME OWNER EMAIL: \_\_\_\_\_

CONTRACTOR EMAIL: \_\_\_\_\_

### D. STRUCTURE & LOT DIMENSIONS, STRUCTURE & LOT CHARACTERISTICS & STRUCTURE SETBACKS

- |   |   |
|---|---|
| 1. TOTAL AREA OF STRUCTURE _____ SQUARE FEET  | 4. WATER SUPPLY <input type="checkbox"/> LCA <input type="checkbox"/> NBMA <input type="checkbox"/> WTA <input type="checkbox"/> WELL |
| 2. TYPE OF CONSTRUCTION <input type="checkbox"/> WOOD FRAME <input type="checkbox"/> MASONRY <input type="checkbox"/> METAL | 5. HEIGHT OF STRUCTURE _____ FEET FROM EXISTING GRADE   |
| 3. NUMBER OF BATHROOMS _____  | 6. NUMBER OF STORIES _____  |

E. ESTIMATED COST OF CONSTRUCTION (MATERIALS + LABOR) \$ \_\_\_\_\_

### F. OTHER PERMITS (PLEASE READ AND CHECK APPROPRIATE BOXES BELOW):

WHAT OTHER PERMITS ARE REQUIRED IN CONJUNCTION WITH THIS PERMIT? (IF APPLICABLE)

- ZONING  BUILDING  DRIVEWAY

PROPERTY OWNER'S SIGNATURE

APPLICANT'S SIGNATURE

DATE

**TWO CHECKS NEEDED FOR PERMIT APPLICATION. ONE PAYABLE TO NORTH WHITEHALL TOWNSHIP FOR THE APPLICATION FEE AND ONE PAYABLE TO THE INSPECTION AGENCY (LIST BELOW) OF YOUR CHOICE FOR REVIEW/DEPOSIT FEE ONLY**

**\*\* ADDITIONAL FEES MAY BE DUE TO THE INSPECTION AGENCY AT TIME OF PERMIT ISSUANCE, FOR THE INSPECTIONS ON THE PROJECT\*\***

Please choose REVIEWING INSPECTION AGENCY: \_\_\_\_\_

<input type="checkbox"/> BARRY ISETT AND ASSOCIATES	610-398-0904	REVIEW/DEPOSIT FEE ONLY	RESIDENTIAL = \$50.00	COMMERCIAL = \$250.00
<input type="checkbox"/> KEYCODES INSPECTION AGENCY	610-866-9663	REVIEW/DEPOSIT FEE ONLY	RESIDENTIAL = \$50.00	COMMERCIAL = \$250.00
<input type="checkbox"/> LEHIGH VALLEY INSPECTION SERVICE	610-395-3827	REVIEW/DEPOSIT FEE ONLY	RESIDENTIAL = \$50.00	COMMERCIAL = \$250.00

### FOR OFFICE USE ONLY

Zoning Review Approved by: \_\_\_\_\_

(Zoning Officer)

(Date)

ZONING DISTRICT: \_\_\_\_\_

DATE APPLICATION RECEIVED: \_\_\_\_\_

RESIDENTIAL APPLICATION FEE: \$ 50.00

COMMERCIAL APPLICATION FEE: \$ 104.00

ELECTRICAL PERMIT # \_\_\_\_\_

MECHANICAL PERMIT # \_\_\_\_\_

PLUMBING PERMIT # \_\_\_\_\_

CASH / CHECK # \_\_\_\_\_

**TOWNSHIP APPLICATION FEE IS NON-REFUNDABLE**