

Caernarvon Township, Lancaster County

2139 Main Street, Narvon, PA 17555

717-445-4244 Fax: 717-445-7119

www.caernarvonlanaster.org

BUILDING PERMIT INFORMATION

Caernarvon Township allows the selection of **one** of the following inspection agencies for residential and commercial projects. The selected agency shall serve as the Building Code Official for the entire project **Review fees will be due to the selected agency in the event the applicant chooses to not proceed with the project.** Please initial the agency you wish to use.

☐ Associated Building Inspections, LLC 717-733-1654 www.weknowcodes.com

☐ Technicon Enterprises, Inc. 610-286-1622 www.technicon2.com

*The applicant shall complete the zoning/building permit application and return to the Caernarvon Township Zoning Officer.

*The Application for Building Permit must be completed if the proposal requires approval under the Uniform Construction Code (UCC).

*The applicant shall include a sketch of the existing buildings and location of proposed construction (noting all sizes and setbacks) and when applicable, location of sanitary sewer, and water facilities. **It is the applicant's responsibility to be aware of any easements associated with the property.**

*Zoning compliance (including, but not limited to storm water, driveway permit, HOP, public and/or private water and sewer, necessary agreements) will be verified and submitted to selected agency with (2) sets of construction (work detail) plans for residential and (3) sets of construction (work detail) plans for commercial.

*The construction plans are reviewed by the selected agency and upon verification of code compliance, returned to the Township with the applicable fees and an approval to issue the building permit.

*Property must have a visible street number and when calling for inspection, provide the permit number, address, and inspection needed. Please contact your selected agent for inspections.

*The applicant will be notified by the Township staff when the application packet is completed and approved by all involved agencies (building code official, storm water, public and/or private water and sewer, driveway permit, HOP permit), and ready for pick-up at the Township Office.

*All review and inspection fees related to the Building/Construction Permit are made payable to the selected agency and submitted to Caernarvon Township prior to the issuance of the permit. Zoning Permit fees are made payable to Caernarvon Township prior to the issuance of the permit. Cash and checks accepted, no credit cards.

*A Certificate of Occupancy will be issued **only** upon final inspection of construction and inspection of the approved stormwater management plan, if such a plan is required. **The Certificate of Occupancy will be issued by the Township.**

*Questions regarding general procedures and those involving specific zoning-related issues should be directed to Robin Royer, Caernarvon Township Zoning Officer at 610-987-9290, or via email at royer@ltlconsultants.com The zoning officer also has hours by appointment, Thursday afternoon, at the Township Office.

CAERNARVON TOWNSHIP, Lancaster County

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Permit #:

Date Received:

APPLICATION FOR ZONING/BUILDING PERMIT

Applicant's Name:	<input type="text"/>	Telephone No:	<input type="text"/>
Applicant's Address:	<input type="text"/>	Cell Phone No:	<input type="text"/>
Applicant's Email Address:	<input type="text"/>		
Owner's Name:	<input type="text"/>	Telephone No:	<input type="text"/>
Owner's Address:	<input type="text"/>	Cell Phone No:	<input type="text"/>
Owner's Email Address:	<input type="text"/>		
Address of Property:	<input type="text"/>		

Description of New Structure or Modifications:

Construction Will Be: ☐ Stone ☐ Brick ☐ Frame ☐ Block ☐ Stucco ☐ Aluminum ☐ Other

Structure/Modification will contain square feet and a height of from grade to the highest point.

Dimension:

Date of Completion:

Proposed Use:

Value of the Completed Structure or Modification:
(excluding land)

PROVIDE TWO (2) SETS OF PLAN WHICH CLEARLY SHOW, THREE (3) SETS IF THE PERMIT IS COMMERCIAL, INDUSTRIAL, OR FOR OTHER NON-RESIDENTIAL PERMITTING

1. Construction plans of sufficient detail to demonstrate compliance with the Township's building code, if applicable
2. The dimensions and shape of the lot to be built upon, if applicable
3. The location and dimensions (length & width) of all existing buildings on the lot, if applicable
4. The location and dimensions (length & width, and height) of all proposed buildings or additions to buildings and off-street parking and/or loading facilities, if applicable
5. The setback dimensions for all proposed buildings or additions to buildings, measured from the side and rear property lines and the abutting street centerline, if applicable
6. The location of sanitary sewer and water supply facilities, if applicable
7. A statement indicating the existing and proposed use. Provide a separate attachment, if necessary, to address any of the above information.

Applicant's Signature

Date

FOR ZONING OFFICER'S USE ONLY

This application is: ☒ Approved ☐ Denied

Zoning Officer's Signature

Date

Comments:

Zoning District: County Account Number: 050-

Zoning Permit Fee: Storm Water Fee: Building Permit Fee: Total:

Caernarvon Township: Date Permit Fee Paid: ☐ Cash ☐ Check Number:

☐ ABI ☐ Code Administrators ☐ Technicon : Date Permit Fee Paid: ☐ Cash ☐ Check Number:

REQUIREMENTS FOR OBTAINING A BUILDING PERMIT

Listed below are the items that are required to be submitted to Technicon Enterprises, Inc., II in order for you to obtain a building permit. Please note that not providing all of the required items may result in the delay of the issuance of the permit. The required application is attached.

1. The Building Permit Application must be made either by the Owner(s) or Lessee of the building or structure, or an agent of either, or by the Registered Design Professional employed in connection with the proposed work.
2. All applications must be accompanied by two sets of site/plot plans.
3. All Applications shall be accompanied by three (3) sets of construction documents. It is recommended but not required (unless commercial application) that a Registered Design Professional prepare the construction documents. The documentation shall include the name and address of the Registered Design Professional and shall be signed, dated and sealed.
4. If the application is for a new home requiring an on-lot septic system, a copy of the septic system permit must be submitted.
5. If an addition including bedrooms is to be constructed, the Sewage Enforcement Officer (SEO) must check the plans to verify that an adequate septic system is available. Verification must accompany the application.
6. If this application is for a new home and municipal water and/or sewer connection will be made, a copy of the issued permit or receipt is required prior to a building permit being issued.
7. If this application is for a new home a driveway permit is required.
8. A Soil Erosion & Sedimentation Control Plan must be submitted to and approved by the Lancaster County Conservation District for disturbances exceeding 5,000 square feet. A copy of the approval letter or the letter of adequacy must be submitted with the building permit application.
9. NO WORK SHALL BEGIN UNTIL A BUILDING PERMIT HAS BEEN ISSUED.

If you have any questions, please call (610) 286-1622 or email us at receptionist@technicon2.com.

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APPLICATION FOR BUILDING PERMITS (PA UCC)

A Building Permit Application must be completed and three sets of construction plans shall be attached and submitted to the Municipal Office. A plot plan must also be provided. The submitted plans will be reviewed by the zoning officer for code compliance and Technicon Enterprises, II for completeness, after which the applicant will be notified of deficiencies and/or when the permit is available for issue along with the applicable fees. The inspections shall be scheduled directly between the owner/contractor and Technicon Enterprises, II. After all work is properly completed and inspected the Certificate of Occupancy will be issued.

<p>Third party plan review:</p> <p>Technicon Enterprises, II 200 Bethlehem Drive Suite 201 Morgantown, PA 19543 Phone: (610) 286-1622 Fax: (610) 286-1679 Email: receptionist@technicon2.com Website: www.technicon2.com</p> <input type="checkbox"/>	<p style="text-align: center;">TOWNSHIP USE ONLY</p> <p>Zoning Review Fee: \$ <input type="text"/></p> <p>Building Permit Fee: \$ <input type="text"/></p> <p>Driveway Permit Fee: \$ <input type="text"/></p> <p>Plumbing/Electrical/Mechanical Fee: \$ <input type="text"/></p> <p>Other <input type="text"/> \$ <input type="text"/></p> <p>State Mandated Admin Fee: \$ <u>4.00</u></p> <p>TOTAL \$ <input type="text"/></p>
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PERMIT NUMBER:

Tax Parcel Number: Zoning District:

APPLICANT

Name of Applicant <input type="text"/>			
Address of Applicant <input type="text"/>			
City <input type="text"/>	State <input type="text"/>	Zip <input type="text"/>	
Phone# <input type="text"/>	Email <input type="text"/>		

OWNER OF RECORD

Name of Owner <input type="text"/>			
Address of Owner <input type="text"/>			
City <input type="text"/>	State <input type="text"/>	Zip <input type="text"/>	
Phone# <input type="text"/>	Email <input type="text"/>		

**PROJECT
INFO**

<input type="checkbox"/> New Building	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration	<input type="checkbox"/> Demo	<input type="checkbox"/> Plumbing	<input type="checkbox"/> Mechanical
<input type="checkbox"/> Electrical					
Location of the project _____					
Brief Description of Project _____					
Cost of Construction _____					
Height _____	Length _____	Width _____	total square feet (L x W) _____		
Proposed impervious _____		square feet			
Proposed Earth Disturbance _____		square feet			
Sewer service: (Public or private) _____		(sewer permit# _____)			
MOBILE HOME ONLY:					
Type of Foundation: _____		Basement: <input type="radio"/> Yes <input type="radio"/> No			
Approved Anchoring Method: <input type="radio"/> Ground Anchors		<input type="radio"/> Pier <input type="radio"/> Oliver System			
Other Type (explain) _____					
***All Mobile Home Applications must accompany the manufacturer's "DAPIA" approved design and instructions for installation of the home.					
**A copy of Installers Certification from DCED needs to accompany the application.					

The applicant certified that all information on this application is correct and the work will be completed in accordance with the approved construction documents and the PA ACT 45 (Uniform Construction Code). The property owner and applicant assumes the responsibility of locating all property lines, setback lines, easements, rights-of-way, floodplain areas. Issuance of a permit and approval of construction documents shall not be construed as authority to violate, cancel or set aside any provisions of the codes of ordinances of the Municipality or any other governing body. The applicant certified he/she understands all the applicable codes, ordinances and regulations.

I hereby authorize the designated Township Officials to enter on the property and to investigate, inspect, and examine the Property set forth herein, including land and structures, to determine compliance with the Construction Code and to determine the accuracy of the statements contained herein.

I am aware that I cannot commence excavation or construction until the Township has issued a Building Permit. By signing this application, I certify that all facts in the application and all accompanying documentation are true and correct. This Application is being made by me to induce official action on the part of the Township, and I understand that any false statements made herein are being made subject to the penalties of 18 Pa. C.S. §4904 relating to unsworn falsification to authorize.

I acknowledge that misrepresentation or errors contained in the Application may result in the revocation of permit. I acknowledge that the holder of the Building Permit is responsible to insure compliance with all applicable Township Ordinances during and at completion of the work authorized by the permit. I acknowledge that the Township required all inspection be performed by the construction code official and that the Township issue a certification of occupancy before the structure which is authorized by this permit may be occupied.

**SIGNATURE
REQUIRED**

Applicant's Signature _____	Date _____
Owner's Signature _____ (If different from Applicant)	Date _____

If the application is a contractor:

1. ☐ ☐ Contractor shall provide the township with a Certificate of Insurance prior to any start of work.

Or exemption:

2. Contractor is not required to provide Workers Compensation Insurance under the provisions of PA Worker's Compensation Law for one of the following reasons, as indicated:

- ☐ ☐ Contractor with no employees.
☐ ☐ Religious exemption under the Workers' Compensation Law

For commercial Applications:

Design Professional of Record (Required for Commercial Applications)

Name:

Address:

Telephone:

Fax:

Certification or Registration:

NOTE:

All permit applications shall be returned to Caernarvon Township Office (Lancaster County), 2147 Main Street, Narvon, PA 17555. (717) 445-4244. Normal office hours are Monday – Thursday 9 am – 3 pm.

SKETCH PLAN

Please show improvements proposed and existing with dimensions to property lines and centerline of roadway.

WORKERS' COMPENSATION INSURANCE COVERAGE INFORMATION

Effective August 31, 1993, the "Workers' Compensation Reform Act", known as Act 44 of 1993, requires contractors to submit a workers' compensation certificate showing the effective date of the coverage and the signature of the insurer each and every time the contractor applies for a zoning/building permit.

The attached form shall be completed and notarized when the contractor signs the permit application.

If the person signing the permit application is not the contractor, that person should check "No" in Part A of the form and provide a signature at the bottom of the form.

- A. The applicant is a contractor within the meaning of the Pennsylvania Workers' Compensation Law.
☐ Yes ☐ No
If "Yes", complete Sections B & C below as appropriate.

B. Insurance Information:

Name of Applicant:
Federal or State Employer Identification Number:
Applicant is a qualified self-insurer for workers' compensation.
☐ Certificate Attached
Name of Workers' Compensation Insurer:
Workers' Compensation Insurance Policy Number:
Policy Expiration Date:

C. Exemption:

Complete Section C. if the applicant is a contractor claiming exemption from providing workers' compensation insurance.

The undersigned swears or affirms that he/she is not required to provide workers' compensation insurance under the provision of Pennsylvania's Workers' Compensation Law for one of the following reasons, as indicated:

☐ Contractor with no employees. Contractor is prohibited by law from employing an individual to perform work pursuant to this building permit unless contractor provides proof of insurance to the Township.

☐ Religious exemption under the Workers' Compensation Law.

Subscribed and sworn to before me this day of 20

Signature of Notary Public

Signature of Applicant

My Commission Expires:

Address of Applicant

County of
Municipality of