



Charlestown Township

11 General Warren Blvd., Suite 1, Malvern, PA 19355

(610) 240-0326 Fax: (610) 240-0328

admin2@charlestown.pa.us

Uniform Construction Code Plumbing Permit Application

Location of Proposed Work or Improvement:

- Street Address: _____ City: _____ State: _____ Zip: _____
Tax Parcel ID No.: _____ Sub-Div. Name & Lot No.: _____ Zoning: _____
 - Owner: _____ Phone: _____ Cell: _____
Mailing Address: _____ City: _____ State: _____ Zip: _____
Email: _____
 - Principal Contractor: _____ Phone: _____ Cell: _____
Mailing Address: _____ City: _____ State: _____ Zip: _____
Email: _____ Fax: _____
- PA Registration #: _____

Type of Work or Improvement: (check one):

New Building
 Addition
 Alteration
 Repair
 Demolition
(Proof of Termination)

Describe Proposed Work: _____

Number of Fixture Units _____ **Estimated Cost of Plumbing Construction** _____

Number and Size of Soil Stacks _____ Type of Sewage Disposal _____

Size of Building Drain _____ Size of Building Sewer _____

Type of Septic Tank and Capacity _____ (give dimensions and number of tanks)

Type of Final Disposal 1. Tile Field _____ 2. Seepage Pit _____ 3. Other _____

Type and Number of Fixtures, Drain and Trap Size: _____

Basement (include stub up for future) Type(s) _____ Size(s) _____

1st Floor Type(s) _____ Size(s) _____

2nd Floor Type(s) _____ Size(s) _____

3rd Floor Type(s) _____ Size(s) _____

Additional fixture listing _____

Description of Building Use: (check one):

| | | |
|------------------------------------------------------|------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Residential</p> <p>One Family Dwelling</p> | <p>Residential</p> <p>Two Family Dwelling</p> | <p>Non-Residential</p> <p>Specific Use: _____</p> <p>Use Group: _____</p> <p>Change in Use: Yes No <i>(If "Yes," indicate former use):</i></p> <p>_____</p> |
|------------------------------------------------------|------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

The applicant certifies that all information on this application is correct and the work will be completed in accordance with the "approved" construction documents and PA Act 45 (Uniform Construction Code) and any additional approved building code requirements adopted by the municipality. The property owner and applicant assume the responsibility of locating all property lines, setback lines, easements, rights-of-way, flood areas, etc. Issuance of a permit and approval of construction documents shall not be construed as authority to violate, cancel or set aside any provision of the codes or ordinances of the Municipality or any other governing body. The applicant certifies that he/she understands all the applicable codes, ordinances and regulations.

Application for a permit shall be made by a Registered Master Plumber or by the Registered Design Professional employed in connection with the proposed work.

I certify that the code administrator or the code administrator's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

Signature of Property Owner [MUST BE OWNER ONLY!]

Print Name of Property Owner [MUST BE OWNER ONLY!]

Date: _____

Directions to the Site:

*****Make checks payable to Charlestown Township*****

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Township Use Only

Date Application Received: _____ Permit No.: _____ Permit Fee: _____

Application Approved/Denied: _____ Plan Reviewed by: _____

Zoning Approval and Zoning Permit No.: _____ If Denied, State Reason: _____