Identification – To be con	mpleted by	y all applicants							
Name	Ad	Address					Phone		
Owner or Lessee									
Contractor PA Contractor Number									
Architect or Engineer									
A copy of the contractor's workers' cor A copy of the contractor's Pennsylvania							ding Permit		
I hereby certify that the proposed w to make this application as his auth conform to all applicable ordinance	orized agent	and I/we agree to ab	ide by the Z	Coning and Building Co	ode of the				
Signature of applicant	Address					Phone			
L	D) NOT WRITI	E BELO	W THIS LINE					
Plans review record – For office use									
Plans review required	Check	Date received	By	Date approved	By	Notes		tes	
Building									
Site plans									
E & S									
Landscaping									
Other									
Additional permits requi	ired or ot	her jurisdictio	n approv	vals					
Permit or approval		Check	Date obtained			Number By		By	
Validation									
Building permit fee \$ Date Paid									
Occupancy Permit fee \$	·	Date Paid		Date Issued					
APPROVED BY: APPROVED BY:									
Building Inspector	Building Inspector Code Enforcement Officer								