APPLICATION FOR ZONING or BUILDING PERMIT: <u>APPLICANT INFORMATION</u>

Name:		
Address:		
Phone #:	Cell #:	
Email:		
Name & Address of Owner if differe	ent than Applicant:	
Note: A permit with	roperty, have you been authorized to make the second	
PROPERTY INFORMATION		
Address Location of proposed proje	ect:	
	one application per proposed project) p	
New Residential/New Commercial	Garage: Attached / Detached	Sign
Residential Accessory	AG Structure	Solar Panels
Residential Addition	Fence	Misc.
Alteration/Reno	Pool: Above Ground / In-ground	
Deck	Commercial Accessory	
Shed	Demolition/Removal	
Proposed Structure & Use:		
Length: Width:	Height:	
# of stories: Type of constru	ction:	
"Footprint" of proposed project: _	square feet	(Linear length, if for a Fence)

APPLICATIONS MUST BE PAID FOR AT TIME OF SUBMITTAL-call or email for \$ total

If payment is not received with your application, the app will be deemed incomplete!

The cost of the structure(s) for which this permit is request	ed:
The lines of the boundary street and the property lines have been acc	urately located and staked on the ground by:
Has a sewage permit been obtained? yes no	N/A for project
Note: For renovation projects on buildings that have been 'bank-own must inspect the current system to determine if adequate and a letter	
Has land been reserved for a replacement sewage system? y	es no N/A for project
Has a Driveway Permit been issued for the proposed access to the pr If yes, what is the date of issuance of the Driveway Permit?	
Has this tract of land been through agricultural preservation or histor	ic preservation?yesno
<i>If applicable</i> : Has the Zoning Hearing Board issued a decision p structure? yes no If yes, date of the decision	of the Zoning Hearing Board
CONTRACTOR INFORMATION	
General Contractor/Builder:	
Phone Number: Cell Number	
Federal or State Employer Identification #:	
Is Applicant required to carry Workers Compensation Insurance: Please <u>attach or email</u> a certificate issued by the Workers Comp certificate holder and stating notification of the ex	ensation Carrier naming the Township as a policy
Foundation Contractor:	
Address:	Phone Number:
Framing Contractor:	
Address:	Phone Number:
Electrical Contractor:	
Address:	Phone Number:
Plumbing Contractor:	
Address:	Phone Number:
Heating Contractor:	
Address:	Phone Number:

Plot Plan ***(see below)

Draw A Sketch of Your Lot Below Showing:

- () 1. Lot Size
- () 2. Location and Dimensions of Existing Building(s)
- () **3. Location and Dimensions of Proposed Building(s)**
- () **4. Location of the Well**
- () 5. Location of Sewage System
- () 6. Location and Dimensions of Driveway(s)
- () 7. Location of All Easements (Gas, Storm Water, Electric, Etc.)
- () 8. Location of Stormwater Management Controls and the direction of flow.

Lot Acreage:

****A plot plan showing the dimensions of the existing and planned structures, existing and planned driveways and parking areas, interior and exterior storage areas, and all significant features such as floodplains, wetlands, easements, and drainage ways shall be submitted with this application. <u>Until such a plan is submitted, this application shall not be considered complete and shall not be processed.</u> A detailed Plot Plan can be obtained from Lanc. Co. GIS at <u>https://www.co.lancaster.pa.us/143/GIS-Division</u>

Construction Code Inspection Company aka building inspector: Commonwealth Code Inspection Service, Inc. Pete Kingsley cell: 717-278-0964

I hereby authorize the designated Martic Township official to investigate, inspect and examine the Property set forth herein, including land and structures, to determine compliance with the Martic Township Zoning Ordinance and to determine the accuracy of the statements contained herein.

I am aware that I <u>CANNOT OCCUPY or USE</u> the Property for the purpose of conducting the use set forth herein and cannot commence excavation or construction until a Permit has been issued by Martic Township. I am aware that I cannot change the use of the Property herein until I have applied for and receive Zoning Permission for such proposed use. By signing this application, I certify that all the 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 Martic 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 authorities.

The issuance of a Zoning Permit is based upon the facts stated and representations made in this application. A Permit may be revoked if the use and/or structure for which it has been issued violates any applicable Township, County, State or Federal law or regulation, including but not limited to the Martic Township Zoning Ordinance. This Permit may also be revoked if it has been issued in error or if issuance was based upon any misrepresentations or errors contained in the application or otherwise made by the Applicant.

The permit holder is advised that persons aggrieved by a use or development permitted on the land of another may file an appeal with the Martic Township Zoning Hearing Board seeking revocation of any permits issued or approvals granted within thirty (30) days from the issuance of such permit, or at a later date if such aggrieved person alleges and proves that he had no notice, knowledge or reason to believe that such approval had been given.

Notice is hereby given that if the property described in this permit will require access to a highway under the jurisdiction of the Pennsylvania Department of Transportation, a Highway Occupancy Permit is required pursuant to Section 420 of the Act of June 1, 1945, P.L. 1242, No. 428, known as the State Highway Law, before driveway access to a state highway is permitted. Access to a state highway shall be only as authorized by the Highway Occupancy Permit issued by the Pennsylvania Department of Transportation.

The Zoning Officer does not guarantee or give opinions relating to the proposed construction under the Permit and does not warrant compliance with applicable laws or regulations by the issuance of a Zoning Permit. The Applicant bears all responsibility for insuring compliance with the Martic Township Zoning Ordinance.

Storm water Management Ordinance along with the Martic Township Subdivision and Land Development Ordinance, and Act 222, the Energy Conservation Act. Applicant acknowledges that he has not relied upon any oral or written statements of officials of Martic Township in making this application.

I acknowledge that the holder of a zoning/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 requires a final inspection to be performed by the Building Inspector/Zoning Officer and that the Zoning Officer issues a Certificate of Use and Occupancy before the structure, which is authorized by this permit, may be occupied. It is my responsibility to insure that this inspection scheduled and the Certificate of Use and Occupancy obtained before the structure may be occupied. I acknowledge that if I occupy or permit the occupancy of this structure prior to issuance of a Certificate of Use and Occupancy, I will have committed a violation of the Zoning Ordinance and will be subject to the penalties and remedies in the Zoning Ordinance. I also acknowledge that, if the structure is occupied prior to the final inspection, work may have to be removed and executed in order that it may be adequately inspected. If the Township is required to perform an inspection after the structure is occupied, intending to be legally bound hereby, I agree to pay the fee established by the Township for delinquent inspections.

Nothing contained in this Application shall be construed to relieve or limit the obligations of Applicant to comply with all provisions of the Zoning Ordinance or to waive violations of the Zoning Ordinance or any other Township Ordinances or to stop the Township from enforcing Township Ordinances, including but not limited to the Zoning Ordinance.

SIGNATURES REQUIRED:

Applicant Printed Name:	
Applicant Signature:	
Date:	
Property Owner's Name:	
Property Owner's Signature:	
Date:	

PLEASE NOTE: The Following documents <u>MUST</u> be submitted with all applications:

NO EXCEPTIONS!!!

IF YOU DO NOT SUPPLY A <u>PLOT PLAN</u> AND <u>DRAWINGS</u> FOR YOUR PROJECT, YOUR APPLICATION WILL BE RETURNED TO YOU!

- <u>One (1)</u> complete sets of <u>detailed plot plans</u> (showing all property lines and setbacks)
- <u>Three (3)</u> complete sets of <u>detailed building plans showing dimensions</u>
 (Commercial plans are required to be signed and sealed by a licensed design professional)
- <u>One (1)</u> digital copy of the complete set for either residential or commercial building projects. This may be emailed to: <u>martictwp@comcast.net</u>

____ Storm Water Management application (Typically all projects must complete one)

Permits and Approvals which may be required prior to issuance of a uniform construction code permit

_____Proof of recording of a subdivision and/or land development plan for all non-residential construction and for construction of any dwelling not on a separate lot of record.

_____ Proof of recording of a Storm Water Management Plan

<u>Highway occupancy permit, (State Driveway permit) if property fronts on a highway under</u> jurisdiction of the Pennsylvania Department of Transportation (State Road) and a new access or changed access is required.

_____Township Driveway permit, if the property fronts a Township road and any driveway is required for access.

_____On-lot sewage disposal system permit, if sewage disposal is required or proposed construction, will result in expansion of number of bedrooms (if a dwelling addition).

Please Note: If requesting a renovation/alteration of an existing structure into a residence, Sewage Enforcement Officer MUST be contacted for inspection of current system for adequacy and a letter received, by the SEO, of such inspection, indicating his findings.

_____Erosion and sedimentation control plan, from the Lancaster County Conservation District.

Office Use Only:

Received:

Zoning District: _____

Set back req	uirements:

Set back requirements.
<u>RLD</u> : Front- 40' (56.5' from center of road), Rear $-$ 40', Side $-$ 15'
<u>RC</u> : Front- 50' (66.5' from center of road), Rear $-$ 50', Side $-$ 20'
<u>AG</u> : Front- 50' (66.5' from center of road), Rear $-$ 50', Side $-$ 20'
<u>SR</u> : Front- 25' (41.5' from center of road), Rear- 25', Side $-10'$ (see Sec. 404 of ordinance, some exceptions)
<u>NC</u> : Front- 25' (41.5' from center of road), Rear- 25', Side – 10' (except when adjacent to another district, then 25')
HC: Front- 25' (41.5' from center of road), Rear- 25', Side – 10' (except when adjacent to another district, then 25')

Reason for denial (if applicable):

Fee Calculations:

	@ \$sq. foot @ \$sq. foot	=
Linear footage	@ \$lin. ft.	=
		=
)	=
)	=
w/ Escrow fee \$2,50		
	t	=
Demolition		=
Perc & Probe		=
Septic		=
Other permit(s), etc.		=
UCC State fee		=
Total due payable to I	Martic Township	=
in the exact amount	only!	
Check #		
Cash		
Date:		

If applicable: Escrow Check # _____

901 (B) ELECTRICAL EXEMPTION AFFIDAVIT

Applicant			
Address			
Religious Sect			
I,	religious sect which e Uniform Construction C sect, I adhere to the e nentioned property will be use xemption for a dwelling unit shall bring the dwelling unit	h has established tenets or teachings we Code and that as a member of established tenets or teachings. I fur ed solely as a residence for myself an it under Section 901 (B) of the Act	which the orther d my t and
* Signature of Ap	plicant		
Subscribed and sworn to me before me this		, 20,	
Signature of No	tary		
	Notary Seal	1	
Code Administrator Approval:			
Date: S	igned:		

* This Affidavit must be signed and sealed in the presence of Notary Public to be valid.