

7. What is the present building used for? _____

8. What will the new building or addition be used for? _____

9. Give definite particulars as to work proposed and materials used _____

10. Upon what kind of soil will any new foundation be laid? _____

11. Is heating included? If so, state kind of heating _____ Kind of fuel used _____

12. Is wiring included? If so, electrician must be registered in Cheltenham Township _____

13. List all contractors/sub-contractors. Copies of Workers' Compensation or Exemption must be included with application. (If additional space required, use attachment)

a. Plumbing:
Name _____ Address _____ Cost: \$ _____
_____ Reg. # _____
Phone _____ FAX _____

b. HVAC:
Name _____ Address _____ Cost: \$ _____
_____ Reg. # _____
Phone _____ FAX _____

c. Electrical:
Name _____ Address _____ Cost: \$ _____
_____ Reg. # _____
Phone _____ FAX _____ Underwriter Certification # _____

d. Excavation:
Name _____ Address _____ Cost: \$ _____
_____ Reg. # _____
Phone _____ FAX _____

e. Concrete:
Name _____ Address _____ Cost: \$ _____
_____ Reg. # _____
Phone _____ FAX _____

f. Masonry:
Name _____ Address _____ Cost: \$ _____
_____ Reg. # _____
Phone _____ FAX _____

g. Drywall:
Name _____ Address _____ Cost: \$ _____

Phone _____ FAX _____

h. Fire Protection:
Name _____

Phone _____ FAX _____

14. Start Date / End Date _____

15. Estimated cost \$ _____ Fee \$ _____

(Must include labor and all material regardless of who purchased materials)

Make Check Payable to Order of "Township of Cheltenham"

IF REMAINING ITEMS ARE NOT APPLICABLE- SEE PAGE 6 TO COMPLETE ITEMS 19A AND 19B.

16. SANITARY SEWER COMPLIANCE INFORMATION

This portion of the permit must be completed for any new construction that generates new sewage flows and for any change of use of an existing building/tenant space that generates additional sewage flows.

This portion of the permit does not apply to:

- _____ a. Additions/Renovations to one and two family dwellings not vacant for over one year
- _____ b. Structures with no Sanitary Facilities
- _____ c. Roofing/Siding/Fencing

FOR DEPARTMENT USE ONLY

Applies

Does not Apply

BUILDING PERMIT # _____

LOCATION _____

TENANT SPACE _____

Cheltenham Township is under a Consent Decree with the Pennsylvania Department of Environmental Protection ("DEP") concerning the Township's Sanitary Sewers.

An approved Sewage Facilities Planning Module ("SFPM") is required for any new construction that generates new sewage flows and for any change in use of an existing building/tenant space that generates additional sewage flows in portions of the Township served by Cheltenham Township Interceptors A, B and D before a building permit can be issued for said new construction or change of use construction.

For the portion of Cheltenham Township served by Interceptor C, a SFPM is not required; however, a DEP determination that the new construction or change of use of an existing building/tenant space is exempt from the SFPM requirements is required before a building permit can be issued.

Also, per DEP regulations, any existing building or tenant space that has been vacant for over one (1) year loses whatever sewage capacity that had been assigned to it. Consequently, building permits for the above cannot be issued until the Applicant obtains the requisite DEP approval.

The Building Permit Applicant is responsible for obtaining the approved SFPM or DEP Exemption Letter, as required. For Cheltenham Township Compliance Records, please furnish the following information:

EXISTING/PREVIOUS:

USE: _____

NUMBER OF EMPLOYEES: _____

LIST NUMBER/TYPE OF SANITARY FACILITIES:
(if additional space required, use attachment)

IF BUILDING/TENANT SPACE IS CURRENTLY VACANT, STATE WHEN PREVIOUS USE ENDED:

PROPOSED:

USE: _____

NUMBER OF EMPLOYEES: _____

LIST NUMBER/TYPE OF SANITARY FACILITIES:
(if additional space required, use attachment)

By: _____
Signature Printed Name Date

FOR DEPARTMENT USE ONLY-SANITARY SEWER COMPLIANCE

INTERCEPTOR _____

SFPM REQUIRED YES NO

APPROVED SFPM SUBMITTED _____ {DATE}

DEP EXEMPTION LETTER REQUIRED YES NO

DEP EXEMPTION LETTER SUBMITTED _____ {DATE}

BY: _____
SIGNATURE DATE:

COMMENTS: _____

17. Area of New Impervious Surfaces: (Structures, Paving, Sidewalks, etc.)

FOR DEPARTMENT USE ONLY-MS-4 REQUIREMENTS		
Do MS4 Requirements Apply:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Pursuant to CTDA No. _____		
Lines & Grades Plan Required	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Seepage Bed(s) Required Size:	<input type="checkbox"/> Yes	<input type="checkbox"/> No

18. NOTES

A. PLEASE NOTE THAT STATE LAW REQUIRES YOU TO CONTACT THE PENNSYLVANIA ONE CALL SYSTEM @ 1-800-242-1776 AT LEAST THREE (3) WORKING DAYS PRIOR TO ANY DIGGING OR EXCAVATION ACTIVITIES EITHER WITHIN THE STREET RIGHT OF WAY OR ON PRIVATE PROPERTY TO ALLOW UTILITY COMPANIES TO LOCATE AND MARK THEIR UNDERGROUND FACILITIES.

B. PLEASE NOTE THAT TWO (2) WORKING DAYS NOTICE MUST BE GIVEN FOR ANY INSPECTIONS.

C. This is the Application for Permit for Additions, Alterations, Roofing, Siding, Repairs; Razing, Removal or Tearing Down of any Building or part of Same; the Erection, Removal or Alteration of Awnings; Signs or Billboards, Etc.

FILE WITH APPLICATION

Two copies of plot plan by a registered engineer or surveyor.
Two copies of construction plans.

D. There is a 30 day period after the issuance of a Building Permit during which time an aggrieved person may file an Appeal to contest the approval of the permit by a Municipality. Applicants that begin construction during the 30-day appeal period do so at their own risk.

E. Workers' Compensation Insurance Certificate or Exemption Form for all contractors/subcontractors is required.

F. Electrical information is required (if applicable).

G. All footings must be inspected before being poured.

H. NOTICE TO TAXPAYERS

UNDER THE PROVISIONS OF ORDINANCE NO. 2022-02, YOU MAY BE ENTITLED TO A PROPERTY TAX ABATEMENT ON YOUR CONTEMPLATED ALTERATION OR NEW CONSTRUCTION. AN APPLICATION FOR ABATEMENT MAY BE SECURED FROM THE OFFICE OF ENGINEERING, ZONING AND INSPECTIONS, AND MUST BE FILED WITH SAME, AT THE TIME A BUILDING PERMIT IS ISSUED.

19. Does the applicant agree that all provisions of the Cheltenham Township Building Code will be complied with, whether specified herein or not?

- Yes No

Further, does the applicant certify that he/she is the owner of record of the named property, or that the proposed work is authorized by the owner of record and that he/she has been authorized by the owner to make this application as his/her authorized agent. In addition, if a permit for work described in this application is issued, he/she agrees that the authorized code official or that official'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.

- Yes No

SIGNATURE _____ DATE: _____

PRINTED NAME _____

20. Remarks _____

FOR INTERNAL USE ONLY

BP# _____
 LOCATION _____

REVIEWED BY: _____
 RECEIVED BY: _____

CHECK OFF LIST	Yes	No	COMMENTS
1. Certificate of Insurance <ul style="list-style-type: none"> • Workers' Compensation • Affidavit 	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	
2. Electrical Permit <ul style="list-style-type: none"> • Required • Issued • Submitted 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
3. Plumbing Permit <ul style="list-style-type: none"> • Required • Issued • Submitted 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
4. HVAC Permit <ul style="list-style-type: none"> • Required • Issued • Submitted 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	(Land Development Required _____)
5. Does Project comply with Zoning Regulations	<input type="checkbox"/>	<input type="checkbox"/>	
6. List Zoning Appeals governing Project			
7. Does Project comply with Zoning Appeals	<input type="checkbox"/>	<input type="checkbox"/>	
8. MS4 Applies	<input type="checkbox"/>	<input type="checkbox"/>	
9. Does Project comply with Record Plan Regulations	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	(List Record Plans governing Project)
10. Is Project in Historical District	<input type="checkbox"/>	<input type="checkbox"/>	
11. Does Project have BHAR COA	<input type="checkbox"/>	<input type="checkbox"/>	
12. Does Project comply with BHAR COA	<input type="checkbox"/>	<input type="checkbox"/>	
13. Does Project require EDTF Review <ul style="list-style-type: none"> • Required • Received 	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	
14. Project eligible for Tax Abatement <ul style="list-style-type: none"> • Main St. Manager Notified 	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	