

ASSESSMENT APPLICATION PERMIT

RICHMOND TOWNSHIP, CRAWFORD COUNTY PENNSYLVANIA

TODAY'S DATE: _____

PERMIT NO. 2020-_____

THIS APPLICATION MUST BE RETURNED WITHIN 15 DAYS OF ABOVE DATE OR IT BECOMES VOID

- The undersigned agrees that the information provided in this application is true and correct.
- A shed or garage will not be permitted to be used as a dwelling.
- This permit will become null and void if work is not started within one year from permit issuance date or work is not substantially completed within two years of same date.

Name _____ Phone # _____

Site Location (include directions) _____

Richmond Twp. Property Tax ID: _____ Septic Permit No. (If applicable): _____

Type of Construction: New Construction Building Addition Ready-made Building

Pole Building Block & Frame Total square footage of project: _____

Property Dimensions: (Width x Depth) _____ Number of Lots _____ or Acres _____

Please describe in detail, the work to be done; including but not limited to size, materials to be used, if heated and type of heat, attached or not attached to another building.

Date work to begin: _____ Estimated time of completion: _____ Estimated Cost: _____

MAKE CHECKS PAYABLE TO: RICHMOND TOWNSHIP SUPERVISORS

PERMIT FEE*: \$35.00 *Application fees are non-refundable whether approved or denied.

Total Amount Paid: _____ Date: _____ Receipt Number: _____

On the back of this application, please draw a map or plot plan of your property, including streets and dimensions. Include buildings on the site and the work to be completed.

Signature of Property Owner _____ Date: _____

Signature of Applicant _____ Date: _____

Using the space below, make a drawing of your project, include lot size, existing building(s), your new project and street/road names.

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FOR OFFICE USE ONLY

Total Amount Paid: _____ Date: _____ Receipt Number: _____

PERMIT: Issued Denied Reason: _____

Name of Contractor (if applicable): _____

Code Enforcement Officer: _____ Date: _____

Permit Issuance Date: _____ Notes: _____