

## Loganville Borough

### Application for Residential Building Permit and/or Zoning Permit

This application is for Zoning and Uniform Construction Code Building Permit in Loganville Borough

Site Address \_\_\_\_\_

#### Applicant Information

Applicant's Name (Contact Person) \_\_\_\_\_ Company Name \_\_\_\_\_

Applicant's Address \_\_\_\_\_

Phone Number \_\_\_\_\_ E-Mail Address \_\_\_\_\_

#### Owner Information

Property Owner's Name \_\_\_\_\_

Property Owner's Mailing Address \_\_\_\_\_

Parcel ID Number \_\_\_\_\_

Phone Number \_\_\_\_\_ E-Mail Address \_\_\_\_\_

#### Contractor Information

Contractor Name \_\_\_\_\_ License # \_\_\_\_\_

Contractor Address \_\_\_\_\_

Contractor Phone Number \_\_\_\_\_

A signed copy of the septic permit must be attached to this application at the time of submission.

**ALL APPLICATIONS ARE TO BE SUBMITTED TO MUNICIPALITY - UNLESS OTHERWISE SPECIFIES  
TYPE OF WORK**

#### **Zoning Proposed work**

Please check the type of work proposed.

##### **Residential**

- ☐ New Construction ☐ Addition ☐ Alteration
- ☐ Demolition ☐ Roofing
- ☐ Repair/Replace ☐ Deck Over 30" Basement finish
- ☐ In Ground pool
- ☐ Roof mounted solar ☐ Ground mounted solar
- ☐ Above Ground Pool ☐ Above ground pool with deck
- ☐ Agriculture building ☐ Accessory Structure ☐ In law quarters
- ☐ in-home Business (Home Occupation)
- ☐ Other \_\_\_\_\_

#### **Building Code Proposed Work**

Please check the type of work proposed.

##### **Residential**

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- ☐ In Ground pool
- ☐ Roof mounted solar ☐ Ground mounted solar
- ☐ Above Ground Pool ☐ Above ground pool with deck
- ☐ Agricultural building exemption ☐ Attached Accessory Structure ☐ In law quarters
- ☐ Other \_\_\_\_\_

**Building/Zoning Contact:** Dependable Construction Code Services

Phone: 717-759-5906 Email: [Info@dccsinspectors.com](mailto:Info@dccsinspectors.com)

Description of the proposed work to be performed:

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**Estimated Cost of Construction (Required)** \_\_\_\_\_

## **Zoning Permit Section**

### Site Description

Proposed structure dimensions (Required): Width \_\_\_\_\_ Depth \_\_\_\_\_

Height \_\_\_\_\_

Yards proposed: Front \_\_\_\_\_ Ft. Rear \_\_\_\_\_ Ft. Side \_\_\_\_\_ (Distance to the property line to new structures)

Total Lot area: \_\_\_\_\_ Acres/Sq. Ft.

Impervious coverage proposed: \_\_\_\_\_ Sq. Ft

All applicable zoning deposit fees if required per municipality are required at the time of permit application submittal. In the event the project is canceled please notify the applicable Township or Borough. Applications for Residential permits may take up to 15 Business days for approval. Fees will be charged if reviews are started.

FILL IN ALL CONSTRUCTION CODE DISCIPLINE DESCRIPTIONS OF WORK BEING DONE THAT APPLIES. FAILURE TO SUBMIT THE REQUIRED ITEMS MAY RESULT IN PERMIT DENIAL.

### **Electrical Permit Section**

☐ New Electrical Service ☐ Temporary Electric Service Type Service: \_\_\_\_\_ underground \_\_\_\_\_ overhead \_\_\_\_\_ amps  
Phase \_\_\_\_\_ Power Company \_\_\_\_\_ ☐ New Home ☐ Addition Adding to Existing Circuit ☐ New circuits for addition ☐ Pool Electric ☐ Electric Heat \_\_\_\_\_

Description of the proposed work to be performed: **Provide panel schedule**

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### **Electrician Information**

Contractor Name \_\_\_\_\_ License # \_\_\_\_\_

Contractor Address \_\_\_\_\_

Contractor Phone Number \_\_\_\_\_

### **Plumbing Permit Section**

Description of the proposed work to be performed:

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### Type of Fixtures and Number of Each Installed:

\_\_\_\_ Washer \_\_\_\_ Bathtub \_\_\_\_ Bidet \_\_\_\_ Dishwasher \_\_\_\_ Laundry Tray \_\_\_\_ Service Sink \_\_\_\_ Sink \_\_\_\_ Shower \_\_\_\_

Water Closet \_\_\_\_ Water Heater \_\_\_\_

Other \_\_\_\_\_

### **Plumbing Contractor Information**

Contractor Name \_\_\_\_\_ License # \_\_\_\_\_

Contractor Address \_\_\_\_\_ Contractor Phone Number \_\_\_\_\_

## HVAC / Mechanical Permit Section

Description of the proposed work to be performed:

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Unit Location: \_\_\_\_\_

Application For: ☐ New Unit ☐ Replace Existing Unit ☐ New Fuel Type ☐ Other \_\_\_\_\_

Type of Unit: ☐ Oil ☐ Gas ☐ Electric ☐ Boiler ☐ Forced Air ☐ Steam ☐ Other \_\_\_\_\_

### HVAC / Mechanical Contractor Information

Contractor Name \_\_\_\_\_ License # \_\_\_\_\_

Contractor Address \_\_\_\_\_ Contractor Phone Number \_\_\_\_\_

By signing this Application, I certify that 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 the Borough 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. I hereby authorize the designated Loganville Borough official to investigate, inspect, and examine the property set forth herein, including land and structures, to determine compliance with the Loganville Borough Zoning Ordinance and to determine the accuracy of the statements contained herein. The issuance of a Zoning Permit is based upon the facts stated and representations made in this application. A Zoning Permit may be revoked if use and/or structure for which it has been issued violate any applicable Borough, County, State, or Federal law or regulation, including but not limited to the Loganville Borough 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 property owner.

The Property Owner bears all responsibility for ensuring compliance with all applicable Borough, County, State, and Federal laws and regulations. The owner assumes all responsibility for the establishment of official property lines, right-of-way lines, easements, and property corners prior to design and construction. Approval can be revoked in the future if it is determined that information provided of these facts was misrepresented. Omission of any required information constitutes misrepresentation and subsequently may result in the revocation of any approvals granted.

I am aware that I cannot commence excavation or construction until a Zoning Permit has been issued by the Loganville Borough Codes Enforcement Officer. I am aware that I cannot use the property or change the use of the property herein until I have applied for and received a Zoning Permit for the such proposed use. I am aware that prior to the occupancy or use of the property for which this Zoning Permit Application has been made, I must apply, in writing, for a Certificate of Use and Occupancy. I am aware that the Application for a Certificate of Use and Occupancy must be made at least fourteen (14) days prior to the date upon which I wish to commence the use and occupancy of the property. I understand that moving personal belongings into the property constitutes a use of the property and if I move such personal belongings into the property, I understand that I am violating the Loganville Borough Zoning Ordinance and the terms of this Zoning Permit.

As the owner of the parcel. I accept all insurance responsibilities for this permit (if Certificate is not provided).[1] As the owner of the parcel or authorized agent. By signing below I am verifying all that information. to the best of my knowledge. is accurate. The property owner is responsible for procuring all other necessary approvals such as HOA approval. PennDOT HOP permits. Sewer & Water permits, etc

**As the owner of the parcel. I accept all insurance responsibilities for this permit (if Certificate is not provided).**

**Provide Certificate of Insurance showing Worker Comp Coverage and listing the applicable municipality as certificate holder (\$1,000,000.)**

**ALL BUILDING PERMIT APPLICATIONS MUST INCLUDE THREE (3) SETS OF BUILDING PLANS**

**PERMIT MUST BE APPROVED, PERMIT ISSUED, AND POSTED ON THE JOB SITE PRIOR TO BEGINNING WORK!**

**Building/Zoning Contact:** Dependable Construction Code Services

Phone: 717-759-5906 Email: Info@dccsinspectors.com

**Signature of Owner** \_\_\_\_\_ **Date** \_\_\_\_\_

As the owner of the parcel. I accept all insurance responsibilities for this permit (if Certificate is not provided).[1] As the owner of the parcel or authorized agent. By signing below I am verifying all that information. to the best of my knowledge. is accurate. The property owner is responsible for procuring all other necessary approvals such as HOA approval. PennDOT HOP permits. Sewer & Water permits, etc

## SITE PLAN (Required)

### **Must Include:**

- PROPERTY LINES
- EXISTING STRUCTURE(S) ON PROPERTY
- (IF APPLICABLE) LOCATION OF SEPTIC SYSTEM
- LOCATION OF PROPOSED STRUCTURE(S)
- DISTANCE LABELED FROM PROPERTY LINES TO PROPOSED STRUCTURE(S)
- DIMENSIONS OF PROPOSED STRUCTURE(S)
- IF STRUCTURE IS A FENCE, THE HEIGHT MUST BE LABELED

**ANY MISSING INFORMATION WILL RESULT IN THE RETURN OF THE APPLICATION**

