



IMPROVEMENT CONSTRUCTION PERMIT APPLICATION

(Township Use Only)

Permit No. _____ Date: _____

Ward: _____ Block: _____

Fee: _____

Receipt: _____

Please initially submit three (3) copies of this application, calculations and sets of plans for the work to be performed to the Building & Planning Department. Subsequent submissions shall include six (6) sets of revisions.

Township Engineer is to be notified 48 hours in advance for each stage inspection.

FEES:

Improvement Construction Permit:

1% of the estimated cost of the improvements, with a minimum charge and a maximum charge.

Applicable Fees for Permits are available on the Township Website and are updated annually (January 1st)

Cost of Improvements (based on Township Engineer's estimate): \$ _____

Description of Work: _____

Site Address _____

Owner's Name: _____

Address _____

Phone #/fax # _____ / _____

Email _____

Plans prepared by _____

Address _____

Phone #/fax # _____ / _____

Email _____

(over)

Certification by Preparer of Plan (Preparer must be a registered professional engineer or registered surveyor).

I, _____, Pennsylvania License _____
attest to the completeness and correctness of the existing conditions as shown, to the compliance of all
proposed construction work with all requirements of the Lower Merion Township Standards and
Specifications, except for specific waivers or modifications as listed.

Signature

Date

Check List

	<i>Yes</i>	<i>No</i>
1. Delineation of limits of work	___	___
2. Area (sq. ft.) disturbed	___	___
3. Area (sq. ft.) undisturbed	___	___
4. Plan view, profile cross-sections, detail sheet, as needed		
5. Contours at 2 foot intervals (existing and proposed)	___	___
6. Horizontal or vertical scales as approved by Township Engineer	___	___
7. Size and location of existing surface structures, storm and sanitary drainage facilities, utility lines, location, species, measured driplines and size of trees singly and in groves	___	___
8. Proposed surface structures, storm and sanitary drainage facilities and utility lines	___	___

Signature of Applicant

If different than owner:

Applicant's Name: _____

Address: _____

Phone #/Fax #: _____ / _____

Email _____