Lower Merion Township
75 E. Lancaster Ave., Ardmore, PA 19003-2376

RESIDENTIAL PERMIT APPLICATION

WE DO NOT ACCEPT PERMIT APPLICATIONS VIA FAX OR EMAIL. PAYMENT MUST ACCOMPANY APPLICATION.

ADDRESS: __________________________________________________________________________________________

FLOOR:___________________________________________STE. NO.:__________________________________________

TENANT:___________________________________________________________________________________________

TYPE OF CONSTRUCTION:
◇ New
◇ Addition
◇ Alteration
◇ Repair
◇ Interior Demolition
◇ Demolition—Building
◇ Fire Repair
◇ Swimming Pool
◇ Pool Renovation
◇ Tennis Court
◇ Satellite Antenna
◇ Temporary Tent
◇ Other

PRINCIPAL TYPE OF FRAME:
◇ Masonry (wall bearing)
◇ Wood Frame
◇ Structural Steel
◇ Reinforced Concrete
◇ Other:____________________

PRINCIPAL TYPE OF HEATING FUEL
◇ Gas
◇ Oil
◇ Electricity
◇ Coal
◇ Other:____________________

* COST MUST MATCH SIGNED CONTRACT

<table>
<thead>
<tr>
<th>COST</th>
<th>Contractor’s Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Building</td>
<td></td>
</tr>
<tr>
<td>Electric</td>
<td></td>
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<tr>
<td>Plumbing</td>
<td></td>
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<tr>
<td>HVAC</td>
<td></td>
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<tr>
<td>Total Cost:</td>
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ELECTRIC, PLUMBING & HVAC WORK REQUIRES SEPARATE PERMITS! Working without the proper permits may result in a Stop Work Order & fines.

FILL OUT FOR NEW CONSTRUCTION & ADDITIONS

PRINCIPAL TYPE OF SEWAGE DISPOSAL:
◇ Public or Private Co.
◇ Individual (septic tank, etc)

PRINCIPAL TYPE OF WATER SUPPLY:
◇ Public or Private Co.
◇ Individual (well, cistern)

TYPE OF MECHANICAL (yes or no):
_____ Central Air Conditioning
_____ Elevator
_____ Fire Sprinklers

DIMENSIONS:
Number of Stories
Total SF of Floor area
All floors, based on Exterior dimensions
Total land area, SF
Number of off-street Parking spaces (enclosed)
Outdoors
Residential Bldgs. Only
Number of Bedrooms
Number of Bathrooms
Full _____ Partial_______

DO NOT WRITE BELOW LINE. OFFICE USE.

◇ Land Subdivision Agreement
◇ Historic
◇ Multi-Unit Property
◇ Preservation Area
◇ Floodplain
◇ Stop Work Order
◇ Storm Easement
◇ Sanitary Easement
◇ Stormwater Management System
◇ Uniform Building Line Ordinance
◇ Rock Hill Road Transportation
◇ City Ave Special Services District
<table>
<thead>
<tr>
<th>NAME</th>
<th>MAILING ADDRESS</th>
<th>PHONE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Owner</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contractor</td>
<td></td>
<td></td>
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<tr>
<td>Architect or Engineer</td>
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</tbody>
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Describe, in detail, the work to be performed:

________________________________________________________________________________________________________
________________________________________________________________________________________________________
________________________________________________________________________________________________________
________________________________________________________________________________________________________
________________________________________________________________________________________________________
________________________________________________________________________________________________________

◊ Electric, plumbing & HVAC work requires separate permits! Working without the proper permits may result in a Stop Work Order & fines.

◊ Plan review for residential permits may be 15 working business days from date of complete submission.

◊ Permit must be posted on site prior to start of work. Approved plans must be available at all inspections.

◊ In effect April 22, 2010, RPR rule established by the EPA requires remodelers and painters, as well as other trades that work in pre-1978 housing who might disturb painted surfaces, to become lead certified renovators.

◊ I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of this jurisdiction. The issuance of this building permit authorizes Building & Planning Department employees the right to enter the property at reasonable hours for the purpose of conducting code inspections. The content of the certificate of workers compensation insurance or affidavit on file with Lower Merion Township is still in effect with no changes in coverage of employees.

Signature of Applicant: ______________________  Address: ______________________  Date: ___________

Print Name: ______________________  Email Address: ______________________

Do not write below (office use only):

<table>
<thead>
<tr>
<th>License/PA HIC #: _______________</th>
<th>Review Fee: _______________</th>
<th>Site Inspection Fee: _______________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lic. Expiration: _______________</td>
<td>Receipt for Review Fee: _______________</td>
<td>Impervious Surface%: _______________</td>
</tr>
<tr>
<td>Liability: _______________</td>
<td>Permit Fee: _______________</td>
<td>Approved: _______________</td>
</tr>
<tr>
<td>Workers Comp: _______________</td>
<td>Receipt: _______________</td>
<td>Date Issued: _______________</td>
</tr>
</tbody>
</table>
BUILDING PERMIT APPLICATION CHECKLIST - Residential

CONTRACTOR/HOMEOWNER

Property Address: ________________________________

Building Permit application – residential
( ) completed with full description of work to be performed
( ) signed
( ) dated
( ) Copy of the signed contract between contractor and homeowner. NOTE: Contract price must match total cost on permit application.
( ) Plan Compliance form signed by contractor
( ) Permit fee – full permit fee amount or a minimum fee for plan review (call the B&P Dept for the amount). Check should be made payable to Lower Merion Township.
( ) 2 sets sealed and signed details for any type of structural work (architectural seal acceptable)
( ) Additions and Alterations checklist completed by contractor (if applicable)
( ) RESCheck (Compliance with the Residential Energy Code (if applicable)
http://www.energycodes.gov/compliance/tools
( ) Copy of Zoning Hearing Board Decision, HARB and/or Historic Commission approval letters, (if applicable).

Exterior work – 2 sets of plans
( ) Site Plan
( ) Impervious surface calculations – existing and proposed
( ) Cross section of buildings and walls from foundation up

Interior work – 2 sets of plans
( ) Easy to read layout of rooms to be worked on
( ) Kitchen and bathrooms need existing and proposed layouts.

Contractor’s license
( ) Contractor and sub-contractors* must be licensed with Lower Merion Township (fee $50.00) or registered with the Attorney General’s office as a Home Improvement Contractor (HIC#)
( ) Proof of liability insurance with a minimum of $300,000 per occurrence naming Lower Merion Township as the Certificate Holder. (address: 75 E Lancaster Ave, Ardmore, PA.)
( ) Workers Compensation Insurance if contractor has employees. Worker Compensation Addendum if contractor does not have employees.

The certificate can be faxed to 610-649-9598 or e-mailed to BUILDING@lowermerion.org

*Electric, plumbing, alarm, and HVAC work must be performed by master tradesmen who are licensed with Lower Merion Township (HIC registration is not acceptable). Separate permit application must be submitted with the appropriate fees.

Contractor: _____________________________ Signature: __________________________

FOR USE BY TOWNSHIP ONLY
__________ Verified above items __________ Date stamped in
__________ ROW __________ Employees initials

T:\Checklist\Building Permit Application Checklist - residential
Lower Merion Township
Plan Requirements for
ADDITIONS AND ALTERATIONS

PROPERTY ADDRESS ___________________________________________________________

I. PLOT PLAN REQUIREMENTS (Two (2) complete sets required)
1. (   ) Scale 1 in. = 20 feet.
2. (   ) Dimensions of lot.
3. (   ) List of zoning requirements for district.
4. (   ) Dimensions of front, side, and rear yard zoning setbacks. All additions proposed within three (3) feet of a required side or rear yard setback must include one of the following:
   A) Verification in writing that the abutting property owner(s) agrees with the location of the property line. This line shall be designated with stakes in the vicinity of the new construction.
   B) A survey from a licensed surveyor with stakes and/or pins at the related property corners, and a stake at the property line in the area of the proposed new construction.
5. (   ) Location and dimensions of house, porch, garage, carport and other accessory structures (i.e., pool and/or sport court).
6. (   ) Location and dimensions of walks, driveways, patios and decks.
7. (   ) Location and dimensions of steps, terraces, fences or retaining walls.
8. (   ) Location of proposed outdoor air conditioning units.
9. (   ) List existing / proposed building and impervious cover information.
10. (   ) Location of any slopes (within affected area) over 25%.
11. (   ) Location, size, material and slope of any existing or proposed drainage pipe facilities or storm drainage.
12. (   ) Location of any wells.
13. (   ) If an individual sewage disposal systems exists show the location of the septic tank, distribution box, absorption field, seepage pit and other essential parts of sewage disposal system.
14. (   ) Location of any floodplain or stream crossing.
15. (   ) Location and size of any stormwater management facility.

II. ARCHITECTURAL PLAN (Two (2) complete sets required)

Are truss or truss joists being proposed?   Yes ____    NO _____

If yes – the use of truss or truss joists require the installation of a fire sprinkler system.

1. (   ) Scale ¼ in. = 1 foot.
2. (   ) Foundation plans and details.
3. (   ) Floor plans.
4. (   ) Elevations.
5. (   ) Detailed cross section of foundation, floors, walls and roof.
6. (   ) Detailed cross section of stairway(s) (include rough opening, treads & risers).
7. (   ) Framing plans (when support beams are utilized).
8. (   ) Provide REScheck checklist to ensure compliance with IECC.
9. (   ) Architectural seal required (when structural changes are involved).
10. (   ) Any additional information which may be required by the Building Department after the initial review of the plans.

NOTE: If the plans submitted are incomplete or missing required information it will delay the review process and prolong the issuance of a building permit

PRINT NAME ____________________________  SIGN __________________________________
DATE ___________________

(Rev 04-16)
Lower Merion Township
Permit Plan Compliance
Verification Form

Date: __________________________ Permit #: __________________________

Property Address: _____________________________________________________________

(Print your name) ________________________________ hereby acknowledges that it is my
responsibility to complete the construction work at the property listed above in compliance with the
plans submitted to, and approved by, the Lower Merion Township Building & Planning Department. I
also understand that if the construction varies from the approved plan, it is my responsibility to notify
Lower Merion Township prior to making any changes to determine whether a revised plan and/or
separate approval is required.

I also acknowledge that failure to comply with the approved plan may result in penalties up to $1,000
for each day the project remains in violation of the approved plan, and that all construction work that
deviates from the approved plan may have to be demolished if (1) it violates the applicable codes
adopted by Lower Merion Township or (2) areas are covered that require inspection by the Township’s
building inspector.

ELECTRIC, PLUMBING & HVAC WORK REQUIRES SEPARATE PERMITS!

PERMIT MUST BE POSTED ON SITE PRIOR TO START OF WORK. APPROVED PLANS MUST BE AVAILABLE
AT ALL INSPECTIONS.

_________________________ ________________________________
Contractor’s Signature Company Name

_________________________
Owner’s Signature (if work is being performed by owner)

Failure to sign this acknowledgement does not alter the contractor’s responsibility to comply with the
approved plan. A Stop Work Order will be issued if the work does not comply with the approved plan
and final occupancy will be withheld until the work is corrected to comply with the approved plan or the
plans are revised and approved by the Building & Planning Department.

If contractor fails to sign this acknowledgement, this notice was given or sent to the contractor by the
Township employee listed below.

_________________________ ________________________________
Name of B & P Staff Person Date