



**BOROUGH OF KUTZTOWN  
COMMUNITY DEVELOPMENT OFFICE**  
324 WEST MAIN STREET      PHONE: 610-683-3290  
KUTZTOWN, PA 19530-1606      FAX: 610-683-3537

**APPLICATION FOR BUILDING PERMIT**

Location of proposed work \_\_\_\_\_

Proposed work \_\_\_\_\_

Materials \_\_\_\_\_

**Three sets of plans and specifications shall be submitted with this application in compliance with §403.42a or §403.62a of PA Title 34 unless waived by the Borough of Kutztown Building Code Official.**

PA One Call I.D. Number \_\_\_\_\_ Date \_\_\_\_\_

	<i>Name</i>	<i>Address</i>	<i>Phone</i>
Property Owner			
Contractor			
		State License#: PA	
<input type="checkbox"/> Architect			
<input type="checkbox"/> Engineer			

Estimated cost of work \$ \_\_\_\_\_ (Include all fixed construction: building, electrical, mechanical & plumbing.)

\*I certify that I am the owner of the construction site or the authorized agent for the owner and make this application and agree that work shall comply with the Uniform Construction Code, PA Act 45, PA Title 34 and all applicable Chapters of the Code of the Borough of Kutztown.

Applicant \_\_\_\_\_  
Print Name
Signature\*
Date

**INCOMPLETE APPLICATION SHALL BE RETURNED.**

**ANY WORK THAT CREATES A NUISANCE IS PROHIBITED AT NIGHT AND ON SUNDAYS AND/OR HOLIDAYS, EXCEPT UPON WRITTEN AUTHORIZATION ISSUED BY THE BOROUGH COMMUNITY DEVELOPMENT OFFICE.**

NIGHT IS ½ HOUR BEFORE SUNSET AND ½ HOUR AFTER SUNRISE

***DO NOT WRITE BELOW THIS LINE***

Application Fee \$ 35.00       Credit Card      Date \_\_\_\_\_      Received \_\_\_\_\_  
 Cash      Paid \_\_\_\_\_      By \_\_\_\_\_  
 Check # \_\_\_\_\_

<u>Submitted Documents</u>	<u>Required</u>	<u>N/A</u>	<u>Yes</u>	<u>No</u>
Plans - signed and sealed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Specifications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Zoning Approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PA One Call I.D. Number	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Application Complete			<input type="checkbox"/>	<input type="checkbox"/>
Returned: By _____				Date _____

**Permitted Work** \_\_\_\_\_

Use \_\_\_\_\_

Type of Construction \_\_\_\_\_ Use Group \_\_\_\_\_

Occupancy \_\_\_\_\_

Plan Review:  No  Yes, Attached

*Additional Information Required:*

- Borough Permit:  Curb/Sidewalk/Driveway  Electrical  Mechanical(Building)  Plumbing  Zoning  
 PA One Call I.D. Number  Wellhead Protection  
 Stormwater Management  Other \_\_\_\_\_

Comments: \_\_\_\_\_

Reviewed for compliance with the Uniform Construction Code and

- Approved  Approved as noted; see attached  Not Approved; see attached  
 Appeal Notice Issued  Yes  No

By \_\_\_\_\_ Date \_\_\_\_\_

Building Plan Review: (see attached calculation sheet)					\$
<input type="checkbox"/> New Construction <input type="checkbox"/> Addition <input type="checkbox"/> Decks/Accessory & Utility Buildings	Square Footage	÷ 100	=	x \$S.F. Factor	\$
<input type="checkbox"/> Alterations (Non-Residential) <input type="checkbox"/> Misc. Construction	\$ Construction Cost	x	% of Constr'n. Cost		\$
Fixed Fee:	<input type="checkbox"/> Alterations (Residential) <input type="checkbox"/> Manufactured Home <input type="checkbox"/> Reroof <input type="checkbox"/> Swimming Pool <input type="checkbox"/> Demolition <input type="checkbox"/> Sign <input type="checkbox"/> Other				\$
<i>Building Fee</i>					\$
<i>Recreation Fee</i>					\$
Mechanical Plan Review: (see attached calculation sheet)					\$
Appliances:	First Appliance				\$
	Each Add'l. Appliance	# of appliances	x	\$	\$
Hood & Duct System:					\$
Fire Sprinkler System:	Up to 200 Heads				\$
	Each Additional Head	# of heads	x	\$	\$
Fire Detection/Alarm System:	Up to 15,000 S.F.				\$
	Each Add'l. S.F.	# of S.F.	x	\$	\$
Alternate Fire Suppression System:	\$ Construction Cost	x	% of Constr'n. Cost		\$
<i>Mechanical Fee</i>					\$
<input type="checkbox"/> PA Training Fee:					\$ 4.00
Fees: See § A231-1.4 and § A231-1.9 of the Kutztown Code.				<i>Total Fee Due</i>	\$

- Credit Card  
 Cash  
 Check # \_\_\_\_\_

Date \_\_\_\_\_ Received \_\_\_\_\_  
 Paid \_\_\_\_\_ By \_\_\_\_\_

Permit Number \_\_\_\_\_