Building Code Permit Application Process

- West Hempfield Township uses Commonwealth Code Inspection Services as our third-party BCO, plan reviewer and inspector. Their contact phone number is (717) 664-2347.
- Applicant contacts Commonwealth about project, required documentation, required inspections and fees.
- Applicant presents the following to the Zoning Officer at the Township Office:
 - o Completed Zoning Permit Application Package with plot plan.
 - o Completed Building Code Permit Application
 - o Proof of Workman's Compensation Insurance OR Notarized Waiver Form
 - West Hempfield Township must be listed as certificate holder and it must list liability and worker's compensation on certificate. If you (the contractor) do not have worker's compensation, see the link for the worker's compensation waiver form https://westhempfield.org/ckfinder/userfiles/files/Forms/Zoning/workers comp.pdf
 - Building Plans Three (3) Sets (8 1/2 x 11 size preferred)

Township will review application for completeness.

- Township will have Commonwealth pick up and review building plans.
- Commonwealth will return approved building plans to the Township.
- Township will contact the applicant when the permits are ready for pick-up and payment.
- Applicant will pay Township two separate fees; Zoning Permit Fee made out to "West Hempfield Township" and Building Code Plan review fee made out to "Commonwealth Code Inspection".
- Township will issue Occupancy Permit after receiving final Commonwealth report.

West Hempfield Township

3476 Marietta Avenue, Lancaster, PA 17601

Phone: (717) 285-5554 Fax: (717) 285-2879

Application Request that includes PA Building Code Review

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West Hempfield Township

3476 Marietta Ave, Lancaster, PA 17601 Phone 717-285-5554 Fax 717-285-2879 www.westhempfield.org

Building Code PermitApplication

Please TYPE or PRINT- Complete ALL Information

Applicant:		Phone #:	
Address:	ss:Email:		
Property Owner:		Phone #:	
Address:		Email:	
Building Occupant:		Phone #:	
Address:		Fax #:	
Principal Contractor: _		Phone #:	
Address:		Email:	
Site Address:		Account #	
Subdivision Name:			Lot #:
Present Use of Property	y:		
Scope of Work:			
Check if work is ex	isting footprint		
Inspector: <u>Common V</u>	Vealth Code. Permit will no	t be issued until the Township is	contacted by the inspector
Building Use and Cons	struction: () One-Family R	esidential Dwelling () Two-F	amily Residential Dwelling
() Other	IBC Use Gro	oupIBC Constru	ction Type
Cost of Construction	\$		
Has a Driveway or H	ighway Occupancy Permit	been issued for access to the	property?
Number of Dwelling	Units Existing:	Proposed:	
Proposed Structure:	Width:Dept	h:Height:	
	Stories: Usabl	e floor area	sq. ft.

Indicate type of heating/ventilating/air co	onditioning:		
Does or will the building contain any:			
Fireplaces: Number: Type of Fue			
Elevators/Escalators/Lifts/Moving Walks			
<u> </u>	() Yes () No		
	() Yes () No		
Refrigeration Systems Water Service () Public () Private	() Yes () No		
Sewer Service () Public () Private			
Attach a copy of the appropriate sewer or se	otic permit.		
I hereby authorize the designated Township Property set forth herein, including land an determine the accuracy of the statements co	d structures, to determine co		-
I am aware that I cannot commence excavation of Application, I certify that all facts in the Application made by me to induce official action on the part subject to the penalties of 18 Pa. C.S. §4904 relationships to the penalties of 18 Pa. C.S. §4904 relationships the subject to the subject	ion and all accompanying docu of the Township, and I understan	mentation are true and and that any false stater	correct. This Application is being
I expressly acknowledge that the issuance of a B Application. I expressly acknowledge that the Tobeen issued violates any applicable Township, C Township may revoke a Building Code Permit if errors contained in the Application or otherwise	ownship may revoke a Building ounty, State or Federal law or re it has been issued in error or if	Code Permit if the use egulation. I also expres	and/or structure for which it has ssly acknowledge that the
I acknowledge that the holder of a Building Code during and at completion of the work authorized inspection be performed by the construction code which is authorized by this Building Code permit the certificate of occupancy obtained before the sthis structure prior to the issuance of a certificate Construction Code and will be subject to the pen structure is occupied prior to the final inspection, inspected. If the Township is required to perform to pay the fee established by the Township for definitions.	by the Building Code Permit. I a cofficial and that the Township may be occupied. It is my respetructure may be occupied. I ack of occupancy under the Constructures and remedies in the Const work may have to be removed an inspection after structure is	acknowledge that the issue a certificate of o consibility to ensure the nowledge that if I occurtion Code, I will have ruction code Ordinance and reexecuted in order	Township requires a final accupancy before the structure at this inspection is scheduled, and appy or permit the occupancy of the committed a violation of the e. I also acknowledge that, if the er that it may be adequately
Nothing contained in this Application shall be co of the Zoning Ordinance or to waive violations of enforcing ordinances, including but not limited to occupancy may be required under the Zoning Or Ordinance requires before the structure which is	f the Zoning Ordinance or any of the Zoning Ordinance. I express dinance and it is my obligation to	other Township ordinal ssly acknowledge that to obtain all permits are	nces or to stop the Township from permits and certificates of use and ad approvals the Zoning
Signature of Owner or Authorized Agent	Print 1	Name	Date

Permit Info Needed (Not Requested on Current Applications)

Building Permit Application

•	Contractor Contact Name.
•	Contractor Cell Phone Number:
•	Contractor PA Home Improvement Registration Number:
•	Contractor Email Address:
•	Workman's Comp Insurance Certificate or Waiver Form
	Certificate Attached
	Waiver Attached-Printed Name of Applicant: