Borough of Marcus Hook 1111 Market Street Marcus Hook, PA 19061 610-485-1341 610-485-9767 (Fax)

BOROUGH OF MARCUS HOOK APPLICATION FOR BUILDING PERMIT

SECTI	ON 1.	PROPER'	TY INFORMA	TION	
Addres	s:				
Tax Fo					
		☐ Commercial Thusiness operates on prop			
SECTIO	ON 2.	OWNER II	NFORMATION	Ī	
Owner:					
Address	s (if differen	t from above):			
Telepho	one:	t from above):(home)		_(work)	(cell)
□ New	Construct	DESCRIPTION C	dition to existin	g building, gara	age)
Propose	ed use:				
Lot Size	2:		Area (sq. ft.)	to be disturbed:	
The foll	lowing mu	st be submitted with	four (4) copies v	with the applica	ition:
•	Site plan so other impo proposed f	howing the size and locations surfaces on the inished grades. Some plans sealed by a r	ocation of existing e site, distances	ng and proposed from lot lines, e	d structures and established and
1	to determi	ne compliance with ap	pplicable Borou	gh codes.	
	of sedimen	n of methods to be use tation and erosion. A se proposed improvem	dditional plans		

SECTION 4. DESCRIPTION OF	PROPOSED IMPROVI	EMENT		
□ Structural Alteration □ Facade Alteration □ Fence □ Interior Alteration/Renovation/Repair □ Shed □ Demolition □ Swimming Pool (in-ground) □ Patios & Driveways □ Roofing or Re-Roofing/Siding □ Sign				
General Description:				
Former Use:Proposed Use:				
The following must be submitted in dupl	icate with the application	ı:		
 Construction plans in sufficient d Borough codes. Utility Release forms (demolition 		ance with applicable		
Roofing:				
□ Roof Repair □ R	e-Roof	□ New Roof		
Existing Roof Material:				
New Roof Material:				
Number of Roofing layers when permitte	ed work is done:			
	CONTRACTOR DESCRIPTION	PART TYON		
SECTION 5. ARCHITECT AND	CONTRACTOR INFO	RMATION		
Architect Name: Architect Address:				
Telephone:	(work)	(cell)		
Contractor/Builder Name: Contractor/Builder Address:				
Telephone:	(work)	(cell)		
PA's Contractor Registration No:	0			

SECTION 6. PERM	IIT INFORMATION						
Date of Application:							
Contractor's Insurance Company:							
Contract Price:	or total cost						
Applicant's Signature	Date:						
(Application can be sign	ed by architect, contractor or property owner)						
I hereby certify that I am the owner of record work is authorized by the owner of record make this application as his authorized ag of this jurisdiction. In addition, if a perm I certify that the code official or the code authority to enter areas covered by such provisions of the code(s) applicable to such	cord of the named property, or that the proposed and that I have been authorized by the owner to gent and I agree to conform to all applicable laws it for work described in this application is issued, official's authorized representative shall have the permit at any reasonable hour to enforce the h permit.						
I hereby agree to proceed with the project applied for in this application in accordance with the project description, information provided herein, and the attached plans.							
(The Borough reserves the right to revoke this per or misrepresentation, or if the Zoning Ordinance i	rmit if it appears that the same has been obtained by fraud is violated.)						
BUILDING INSPECTOR / ZONING OF	FICER NOTES:						
FOR OFFICE USE ONLY							
Date Application Received:Da	ate Certificate of Insurance Received:						
Building Permit#: Fee:	Date Paid:Receipt#:						
Not Approved:	Date:						
Reason for Refusal:							
Zoning Officer's Signature	Date						
Zoning Permit No:							
Building Inspector's Signature	Date						

Addendum to Building Permit

		M D	unicipalityate Issuedermit No	
	applicant for the buts (check one):		nce with Act 44 of 1993, hereby	
☐ Ce	rtificate of Insuranc	e (please attach)		
□Се	rtificate of Self-Insu	rance (please attach)		
4			COMPANY ADD JOB SITE TE OF INSURANCE****	
the fol Name or Sel	llowing: of Insurerf-Insurer		has been submitted, please complete	
City		State	Zip Code	
Name	of Contractor/Polic	yholder	Period Ends	
Addre	ss		Zip Code	
City		State	Zip Code	
Contra	actor/Policyholder's	federal /state employer	identification number (EIN)	
1.	Occupational Disease Compensation Act.	Act, and, where applicable, t	of the Worker's Compensation Act, the he federal Longshore and Harbor Workers' ssuing the building permit is to be named a	
3.	policy certificate holde	er.	uired to carry their own workers' compensation	
4.	coverage. The contractor/policyh	older will notify the municipal	ity of any change in status, cancellation or	
5.	expiration of workers' compensation coverage. Violation of the Workers' Compensation Act or the terms of this permit will subject the contractor/policyholder to a stop-work order and other fines and penalties as provided by law.			
III.	If an exemption is presence of a nota		omplete the following and sign in the	
	Basis for exemption	n (check one):		
	☐ Applicant is	an individual who owns	the property .	
	☐ Contractor/a	applicant is a sole propr	ietorship without employees.	

		Contractor/Applicant is a corporation, and the only employees working on the project have and are qualified as "Executive Employees" under Section 104 of the Workers' Compensation Act. Please explain:
		All of the contractor/applicant's employees on the project are exempt on religious grounds under Section 304.2 of the Workers' Compensation Act. Please explain:
		Other. Please explain:
Name Addre	of App	plicant
City		State Zip Code
1. 2. 3.	covera The ap the per Violation	bcontractors used on this project will be required to carry their own workers' compensation ge. pplicant is not permitted to employ any individual to perform work on this project pursuant to rmit in violation of the Act. on of the Workers' Compensation act or the terms of this permit will subject the applicant to work order and other fines and penalties provided by law. My signature on behalf of or as the contractor/ applicant for this building permit constitutes my verification that the statements contained here are true, and that I am subject to the penalty of 18 Pa. C.S.A. §4904 relating to unsworn falsifications to authorities.
		Signature Name (Please Print)
		Title Name of Company

Note:

FEE SCHEDULE

Chapter 76, Building Construction

Applicants for permits shall pay a fee based on the schedule below. Fees shall be based on total estimated project cost. The Code Enforcement Department may require the applicant to provide a contract or other similar documentation to verify the estimated project costs. Fees must be paid at the time of application. Applicants shall also pay any review fees mandated by the Commonwealth of Pennsylvania from time to time (\$4.00 per permit as of the date of adoption of this resolution).

<u>Building Permits</u>: covers all building construction (residential, commercial, industrial) new construction, alterations, repairs, re-roofing, additions, renovations, demolition, etc. §76-3

For new structures, additions and alterations including garages, balconies, sheds, decks and signs.

\$20 for each \$1,000 of estimated cost or fraction thereof.

For demolition.

\$75 for the first \$1,000 of cost or fraction thereof and \$20 per additional \$1,000 of cost or fraction thereof.

For roofing, re-roofing, siding and facade alterations.

\$20 for each \$1,000 of estimated cost or fraction thereof; minimum fee of \$40.

For patios and driveways not requiring a Stormwater Management Plan. \$25

For in-ground swimming pools.

\$20 for each \$1,000 of estimated cost or fraction thereof; minimum fee of \$40.

Building permit fees include the cost of two inspections. Additional fees will be charged under the following circumstances:

- A. Re-inspection Fees: \$40 dollars for the third (3rd) inspection and each additional inspection made until the violation or inspection passes or has been approved.
- B. Special Inspections: \$60 dollars for additional inspections required during non-working hours to include weekends.
- C. Accelerated Inspections: \$60 dollars for inspections required by a person who has proceeded without an approved permit, and requests an accelerated processing of a permit.