

TOWNSHIP OF SOUTH STRABANE

550 Washington Road • Washington, PA 15301

(724) 225-9055 Fax (724) 225-2035

APPLICATION FOR BUILDING PERMIT

Date Application Received _____ Permit No. _____

Application is hereby made for a permit under the building ordinances of South Strabane Twp. and in connection therewith the following facts are certified to be true and correct.

- 1. Plot of the lot showing the exact location of the proposed building. For identification purposes, said attached plot plan is signed by the applicant and becomes part of this application.
- 2. The contract price or estimated cost of said construction is: \$ _____
- 3. Square Footage _____
- 4. Act 45 / ICC Applicable _____
- 5. Workers Compensation: Certificate of Insurance _____ Affidavit of Exemption _____

Location of property (Including Lot Number, Street and Plan) _____

Is Application for New Building / Addition / Accessory / Other? _____

Property Owner: Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

Contractor: Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

Notes: _____ Parcel No# _____

Size of Lot _____ Zoning District _____ Driveway Permit _____

Setbacks: Front _____ Rear _____ Left _____ Right _____

Variance Granted _____ Date Granted _____

**CERTIFICATION FROM WASHINGTON-EAST WASHINGTON JOINT AUTHORITY
(IF APPLICABLE)**

Sewer Permit Receipt _____ Permit Fee \$ _____ Paid on _____ Expires _____

Letter from Township _____

CERTIFICATION FROM SOUTH STRABANE SANITARY AUTHORITY

Number of EDU's Assigned _____ Tap-Connection Fee of \$ _____

Check No. _____ Date _____ Signed _____

WCSC ON-LOT SEWAGE PERMIT

Permit No. _____ Issued By _____ Date Issued _____

SOUTH STRABANE TOWNSHIP PERMIT

Permit Fee \$ _____ Check No. _____ Date _____

Occupancy Permit Fee \$ _____ Plan Review Fee \$ _____

State UCC Fee \$ _____

This permit shall be valid only as long as the sewer permit remains valid. If the construction or alteration of the structure is delayed beyond the date of validity, and extension or new permits may be required from the sewer agency issuing the sewer permit and the Township. (This Permit Valid for 180 Days)

The applicant agrees to comply with the provisions of all laws and ordinances regulating building construction in South Strabane Township, including the ICC / Act 45 construction codes, local amendments and the smoke alarm requirements set forth by the code and Pennsylvania laws.

The applicant hereby certifies that the facts stated in this application are true and correct and agrees that official notices may be mailed to the applicant at the address provided below.

It is understood and agreed upon completion of said work, notice shall be provided to the building official of South Strabane Township for final inspection and issuing of the Occupancy Permit.

Signature of Applicant / Agent _____ Address _____

Application Approval Date _____ Township Official _____