



# BUILDING/ZONING/FLOODPLAIN PERMIT APPLICATION

**Borough of Catasauqua**

**90 Bridge Street**

**Catasauqua, PA 18032**

**Ph: 610-264-0571 Fax: 6110-264-8228**

PERMIT # \_\_\_\_\_

ISSUE DATE: \_\_\_\_\_

RES/COM \_\_\_\_\_

PROP ID # \_\_\_\_\_

**PLEASE PRINT LEGIBLY AND FILL OUT FORM COMPLETELY  
ATTACH A SITE PLAN AND WORKERS COMPENSATION  
CERTIFICATE/WAIVER**

**DATE RECEIVED:** \_\_\_\_\_

## PROPERTY INFORMATION

**Address:** \_\_\_\_\_ **Apt/Ste:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Tax/Parcel ID #:** \_\_\_\_\_ **Lot Size:** \_\_\_\_\_ **Sq Ft:** \_\_\_\_\_

**Subdivision:** \_\_\_\_\_ **Business Name:** \_\_\_\_\_

**Present Use of Property/Structure:** \_\_\_\_\_

## APPLICANT INFORMATION

**Applicant Is:**      **Owner**                      **Contractor**                      **Design Professional**                      **Other:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Best Contact #:** \_\_\_\_\_ **Alternate Contact #:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

An application is hereby made for a permit for construction as indicated herein and which shall be located as shown on the plot plan herewith and/or use the premises for the purposes described herein. Applicant agrees that such work will comply with all provisions of the Zoning Ordinance and Building Code, with all deed restrictions and with all other applicable Catasauqua Borough Ordinances. Owners of the property pertaining to and stated on this application, upon approval of this application, do hereby grant permission to Borough officials to enter said property for purposes of inspection for compliance with Borough codes and ordinances.

## OWNER INFORMATION

**SAME AS APPLICANT**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Best Contact #:** \_\_\_\_\_ **Alternate Contact #:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

## CONTRACTOR INFORMATION

**SAME AS APPLICANT**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Best Contact #:** \_\_\_\_\_ **Alternate Contact #:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**PA Home Improvement Contractor Registration #** \_\_\_\_\_

## DETAILED DESCRIPTION OF PROJECT

**Cost (Including Labor & Materials):** \_\_\_\_\_

**Interior Floor Space:** \_\_\_\_\_ **Number of Bedrooms:** \_\_\_\_\_ **Stories:** \_\_\_\_\_ **Height:** \_\_\_\_\_

**Total Sq Ft of new construction (include basement, garage, porch/deck, all floors):** \_\_\_\_\_

**APPLICATION FOR:  
(CHECK ALL THAT APPLY)**

**PROPOSED USE:**

**NEW BUILDING  
EXTERIOR ALTERATIONS  
INTERIOR ALTERATIONS  
DEMOLITION  
DRIVEWAY  
FENCE  
PATIO/DECK  
SHED  
INGROUND POOL  
ABOVE GROUND POOL**

**ADDITION  
ACCESSORY STRUCTURE  
TEMPORARY BUILDING  
CHANGE OF USE  
PARKING LOT  
ROAD OPENING (HOP)  
ELECTRICAL  
MECHANICAL  
PLUMBING  
TENANT FIT OUT  
OTHER (SEE DESC.)**

**SINGLE FAMILY DWELLING  
MULTI FAMILY DWELLING  
TOWNHOUSE  
APARTMENT BUILDING  
STORAGE  
ACCESSORY  
PLACE OF ASSEMBLY  
BUSINESS (OFFICE)  
EDUCATIONAL  
INDUSTRIAL  
MERCANTILE (STORE)  
OTHER (SEE DESC.)**

**MISCELLANEOUS INFORMATION**

**CHECK IF PUBLIC UTILITIES HAVE BEEN DISCONNECTED BEFORE DEMOLITION:**

**ELECTRIC      WATER      GAS      CABLE      PHONE**

**WILL BLASTING BE REQUIRED:      YES      NO**

**IF YES, PROVIDE CERTIFIED BLASTER & STATE BLASTING PERMIT # \_\_\_\_\_**

**IN FLOOD PLAIN      PUBLIC SEWER      MANUFACTURED      DETACHED GARAGE  
PUBLIC WATER      PRIVATE SEPTIC      BASEMENT/OTHER: \_\_\_\_\_  
PRIVATE WELL      INDUSTRIALIZED      ATTACHED GARAGE**

<b>CONSTRUCTION TYPE</b>	<b>HEATING FUEL</b>	<b>SIZE OF IMPROVEMENT</b>	<b>DISTANCE FROM LOT LINES</b>
<b>WOOD:</b>	<b>GAS:</b>	<b>WIDTH: _____</b>	<b>FRONT: _____</b>
<b>MASONRY:</b>	<b>OIL:</b>	<b>HEIGHT: _____</b>	<b>REAR: _____</b>
<b>STRUCTURAL STEEL:</b>	<b>ELECTRICITY:</b>	<b>LENGTH: _____</b>	<b>LEFT: _____</b>
<b>REINFC'D CONCRETE:</b>			<b>RIGHT: _____</b>
<b>OTHER: _____</b>			

**SWIMMING POOL DETAILS**

**TYPE OF POOL:      ABOVE GROUND (INCLUDING INFLATABLES)  
INGROUND**

**FENCE - TYPE: \_\_\_\_\_ HEIGHT: \_\_\_\_\_      GATE - HEIGHT: \_\_\_\_\_  
LADDER - LINEAR FEET: \_\_\_\_\_      DECK - LENGTH: \_\_\_\_\_ WIDTH: \_\_\_\_\_**

**POOL SIZE: \_\_\_\_\_ FT X \_\_\_\_\_ FT OR DIAMETER: \_\_\_\_\_ FT = \_\_\_\_\_ SQ FT**

**OFFICE USE ONLY**

<b>DEPARTMENT</b>	<b>APPROVED BY</b>	<b>N/A DENIAL DATE</b>	<b>PERMIT FEES</b>	<b>MISC.</b>
<b>CMI ZONING</b>			<b>ZONING</b>	<b>SITE PLAN</b>
<b>CMI BUILDING</b>			<b>BUILDING (UCC)</b>	<b>WORKERS COMP</b>
<b>PUBLIC WORKS</b>			<b>FLOOD PLAIN</b>	<b>WAIVER FORM</b>
<b>ENGINEER</b>			<b>ADMIN</b>	
			<b>STATE FEE</b>	<b>\$4.50</b>
			<b>DEPOSIT PAID</b>	
			<b>REMAINING FEES PAID:</b>	<b>DATE:</b>

**PERMIT ISSUED BY: \_\_\_\_\_ DATE: \_\_\_\_\_**

**PERMIT DENIED BY: \_\_\_\_\_ DATE: \_\_\_\_\_**

**DENIAL REASON: \_\_\_\_\_**

**NOTE: PAYMENT OF FEE DOES NOT GUARANTEE APPROVAL  
FEES ARE NON-REFUNDABLE**