

# BUTLER COUNTY BUILDING PERMIT APPLICATION

I.D. NO. \_\_\_\_\_ DISTRICT \_\_\_\_\_ MAP AND PARCEL NO. \_\_\_\_\_

## IMPORTANT - COMPLETE ALL ITEMS MARK BOXES WHERE APPLICABLE

### I. IDENTIFICATION

|                                |      |                 |                  |           |
|--------------------------------|------|-----------------|------------------|-----------|
| OWNER'S NAME PER DEED OR TITLE | NAME | MAILING ADDRESS | PROPERTY ADDRESS | PHONE NO. |
| PREVIOUS OWNERS                |      |                 |                  |           |
| CONTRACTOR                     |      |                 |                  |           |

### II. TYPE AND COSTS OF IMPROVEMENTS

|                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. TYPE OF IMPROVEMENT</b><br><input type="checkbox"/> 1. NEW BUILDING<br><input type="checkbox"/> 2. ADDITION<br><input type="checkbox"/> 3. ALTERATIONS<br><input type="checkbox"/> 4. REPAIR - REPLACEMENT<br><input type="checkbox"/> 5. WRECKING<br><input type="checkbox"/> 6. RELOCATION<br><input type="checkbox"/> 7. FOUNDATION | <b>B. PROPOSED USE</b><br><input type="checkbox"/> 1. SINGLE FAMILY<br><input type="checkbox"/> 2. DUPLEX<br><input type="checkbox"/> 3. MULTI FAMILY<br><input type="checkbox"/> 4. GARAGE<br><input type="checkbox"/> 5. CARPORT<br><input type="checkbox"/> 6. PORCH/INGROUND POOL<br><input type="checkbox"/> 7. MOBILE/MODULAR HOME (SEE E) | <input type="checkbox"/> 8. CHURCH<br><input type="checkbox"/> 9. INDUSTRIAL<br><input type="checkbox"/> 10. COMMERCIAL<br><input type="checkbox"/> 11. INSTITUTIONAL<br><input type="checkbox"/> 12. PUBLIC UTILITY<br><input type="checkbox"/> 13. SCHOOL<br><input type="checkbox"/> 14. OTHER SPECIFY _____ | <b>C. CONST. OR DEMO COST</b><br>1. COST OF CONST.<br>A. ELECTRICAL _____<br>B. PLUMBING _____<br>C. HEATING/AC _____<br>D. OTHER _____<br>TOTAL _____ |
| <b>D. OWNERSHIP</b> <input type="checkbox"/> 1. PRIVATE<br><input type="checkbox"/> 2. PUBLIC                                                                                                                                                                                                                                                | <b>E. MOBILE/MODULAR HOME SERIAL NO.</b> _____                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                        |

### III. SELECTED CHARACTERISTICS OF BUILDING

|                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. PRINCIPAL TYPE OF FRAMING</b><br><input type="checkbox"/> 1. BRICK - STONE - BLOCK<br><input type="checkbox"/> 2. WOOD FRAME<br><input type="checkbox"/> 3. STRUCTURAL STEEL<br><input type="checkbox"/> 4. REINFORCED CONCRETE<br><input type="checkbox"/> 5. OTHER - SPECIFY _____                                                                                  | <b>B. TYPE OF SEWAGE DISPOSAL</b><br><input type="checkbox"/> 1. PUBLIC<br><input type="checkbox"/> 2. PRIVATE PERMIT NO. _____<br><b>D. TYPE OF WATER SUPPLY</b><br><input type="checkbox"/> 1. PUBLIC<br><input type="checkbox"/> 2. PRIVATE | <b>C. DIMENSIONS</b> _____ X _____<br>1. NO OF STORIES _____ 3. BSMT SQ. FT. _____<br>2. TOTAL ACREAGE _____ 4. TOTAL SQ. FT. _____<br><b>E. NUMBER OF PARKING SPACES</b><br>1. OFF STREET _____<br>2. ENCLOSED _____ OUTDOORS _____ |
| <b>IV. RESIDENTIAL BUILDINGS ONLY</b><br>A. NO. OF BEDROOMS _____<br>B. NO. OF BATHS _____<br>1. FULL _____<br>2. HALF _____                                                                                                                                                                                                                                                | <b>VII. TYPE OF MECHANICAL</b><br>YES NO<br>A. A/C _____<br>B. ELEV. _____                                                                                                                                                                     | <b>IX. DIRECTIONS TO SITE FROM NEAREST INTERSECTION</b><br><br>                                                                                  |
| <b>V. LOCATION</b><br>A. BUILDING SET BACK<br>1. FROM STREET _____<br>2. FROM SIDE LS _____ RS _____<br>3. FROM REAR _____                                                                                                                                                                                                                                                  | <b>VIII. TYPE OF HEATING FUEL</b><br><input type="checkbox"/> A. GAS <input type="checkbox"/> D. COAL<br><input type="checkbox"/> B. OIL <input type="checkbox"/> E. OTHER<br><input type="checkbox"/> C. ELEC _____                           |                                                                                                                                                                                                                                      |
| <b>VI. CHECK OTHER STRUCTURES ON PROPERTY</b><br><input type="checkbox"/> A. NONE <input type="checkbox"/> E. BARN<br><input type="checkbox"/> B. HOUSE <input type="checkbox"/> F. SHED<br><input type="checkbox"/> C. MOBILE/MODULAR HOME <input type="checkbox"/> G. INGROUND POOL<br><input type="checkbox"/> D. GARAGE <input type="checkbox"/> H. OTHER SPECIFY _____ |                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                      |

### X. HIGHWAY AND ENERGY ACTS

- A. HAVE YOU OBTAINED A PERMIT AS REQUIRED BY SECTION 420 OF THE STATE HIGHWAY LAW (P.L. 1242 NO. 428)? ☐ YES ☐ NO.
- B. HAVE YOU COMPLIED WITH ACT 222 OF THE BUILDING ENERGY CONSERVATION ACT? ☐ YES ☐ NO.

### XI. THE OWNER OF THIS BUILDING AND/OR UNDERSIGNED AGREE TO CONFORM TO ALL APPLICABLE

LAWS OF \_\_\_\_\_ MUNICIPALITY.

|                                |         |                     |
|--------------------------------|---------|---------------------|
| SIGNATURE OF APPLICANT         | ADDRESS | DATE OF APPLICATION |
| SIGNATURE OF MUNICIPAL OFFICER | FEE     | APPROVED REFUSED    |

### XII. FOR MUNICIPAL USE ONLY

COMMENTS, RESTRICTIONS, DATE PERMIT EXPIRES (ACCORDING TO LOCAL CODES)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_