BOROUGH OF TULLYTOWN

500 Main Street
Tullytown, PA 19007
215-945-1560 • Fax: 215-945-4522

BUILDING PERMIT

A. IDENTIFICATION

APPLICANT – *Complete unshaded areas only* When changing contractors, please notify this office.

Owner: _____
Tenant: _____
Address: _____
City/St/Zip: _____
Telephone: _____
Cell: _____
Work Site Address: _____
City/St/Zip: _____

Contractor: _____
Address: _____
City/St/Zip: _____
Telephone: _____
Cell: _____
License #: _____
Federal Employer ID #: _____
(Certificate of Insurance for Worker's Compensation or signed exemption form needed)

Permit # _____
Date Issued: _____
Rev. Date: _____
Block: _____
Lot #: _____
Tax Parcel: _____
☐ New Commercial ☐ Other Commercial
☐ New Residential ☐ Other Residential

B. TECHNICAL SITE DATA

DESCRIBE PROPOSED WORK IN DETAIL:

ESTIMATE OF TOTAL COSTS FOR ALL WORK:

Total Square Feet:	Number of Stories:
Use Group:	Height of Structure:
Type of Construction:	

TYPE OF WORK BEING DONE:

Sq. Ft.	Fencing (supply height if over 6 ft.)	Sq. Ft.	Roofing
Sq. Ft.	Deck(s)	Sq. Ft.	Demolition
Height	Pool	Sq. Ft.	Sign
Sq. Ft.	Additions / Alterations:		
Sq. Ft.	Accessibility:		
Sq. Ft.	Other:		
Sq. Ft.	Other:		

I hereby acknowledge that I have read this application and state the above is correct to comply with all Municipal ordinances and state laws regarding construction.

Signature: ☐ Owner ☐ Contractor ☐ Owner's Representative

Building Code Official Use Only

☐ **Plans Approved**
☐ **Plans Approved with Comments**

Date Issued: _____
Code Official: _____
State Cert. # _____

UCC Building Fee $ _____
Plan Review Fee $ _____
Administrative Fee $ _____
State Fee $ _____
Total Cost $ _____